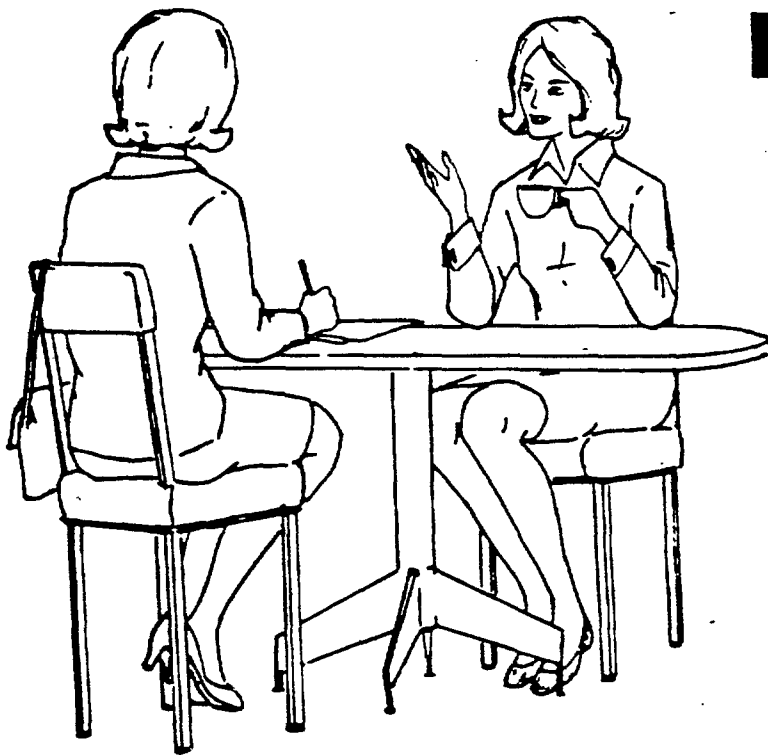


**HIS-100
(1979)**

HEALTH INTERVIEW SURVEY

Interviewer's Manual

C



**U.S. DEPARTMENT OF COMMERCE
Bureau of the Census**

Acting as Collecting Agent for U.S. Public Health Service

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PART A
THE HEALTH INTERVIEW SURVEY AND YOU

CHAPTER 1

DESCRIPTION OF THE SURVEY

A Purpose of
the Health
Interview
Survey

1 General

The basic purpose of the Health Interview Survey is to obtain information about the amount and distribution of illness, its effects in terms of disability and chronic impairments, and the kind of health services people receive.

The Health Interview Survey is part of the National Health Survey, which began in May 1957. Prior to that time, the last nationwide survey of health had been conducted in 1935-36. Many developments affecting the national health had taken place in the intervening years:

The Nation went from depression to prosperity and through two wars.

"Wonder drugs" such as penicillin were discovered and put into use.

Public and private health programs were enlarged.

Hospitalization and other health insurance plans broadened their coverage to protect many more people.

Increased research programs were providing information leading to the cure, control or prevention of such major diseases as heart disease, cancer, tuberculosis, muscular dystrophy, and polio through the development of products like the Salk Polio Vaccine.

Despite extensive research on individual diseases in the years 1937-1957, one important element had been missing. We had only piecemeal information from the people themselves on their illness and disability or the medical care they obtained. Many persons although sick or injured never became a "health statistic," since requirements for reporting illnesses were limited to hospitalized illnesses and certain contagious diseases.

In recognition of the fact that current information on the Nation's health was inadequate, and that national and regional health statistics are essential, the Congress authorized a continuing National Health Survey (Public Law 652 of the 84th Congress). Since May 1957, the United States Public Health Service has regularly collected health statistics under congressional authority.

2 Examples of uses of the data

How is the information obtained from the National Health Survey used? Here are some examples taken from a discussion of the program before the Congress.

a Helps give direction to health expenditures

Total health expenditures, both public and private, run into many billions of dollars a year. Better statistical information helps to give more effective direction to the expenditure of these large sums.

b Occurrence and severity of illness and disability

Data on health statistics are valuable tools for the public health officer. The nationwide system of reporting communicable disease has been an important factor in the reduction, and in some instances virtual eradication, of some diseases which were chief causes of illness, disability, and even death several generations ago. Knowledge of the number and location of many diseases made it possible to develop effective programs of immunization, environmental sanitation, and health education which are essential factors in their control.

Today, chronic illness and disability, among both adults and children, constitute our greatest public health challenge. Chronic illness and disability lower the earning power, living standards, and the general well-being of individuals and families. They reduce the Nation's potential output of goods and services and, in advanced stages, burden individuals, families and communities with high cost of care and assistance. The basic public health principle to be applied is the same: Prevention. Better information on occurrence and severity of diseases and disability are needed in order to prevent their occurrence.

c Control of accidents

Programs for effective control of accidents are still in their infancy. Statistics on the cause and frequency of nonfatal as well as fatal accidents of various types help to shape accident prevention programs and measure their success.

d Health of the aged

There is nationwide interest in prolonging the effective working life of the aged and aging. Knowledge of the health status of people in their middle and later years is essential to effective community planning for the health, general welfare, and continued activity of older persons.

e Health education and research

Governmental health programs have their counterparts in many of the national and local voluntary associations and organizations. These associations collect many millions of dollars annually, to promote research and education in such fields as polio-myelitis, cancer, lung disease, heart disease, mental health, crippling conditions, multiple sclerosis, alcoholism, and so on.

Before Congress authorized the continuing National Health Survey, these organizations had to rely on mortality statistics almost exclusively as a source of information about the disease or condition with which they are principally concerned. Current health statistics produced by the National Health Survey aid such groups greatly in planning their activities and expenditures.

f Health facilities - hospital care, rehabilitation, insurance, etc.

The growth of prepayment coverage under voluntary health insurance has increased the demand for the kind of illness statistics which can provide reliable estimates of the number of people who will be ill for a given number of weeks or months. Illness statistics provide an improved measurement of need for hospitals and other health facilities and assist in planning for their more effective distribution. Public school authorities are aided in their planning for the special educational problems of mentally retarded or physically handicapped children. Vocational rehabilitation programs, public officials and industries concerned with manpower problems and industrial safety and health measures, the insurance industry and the pharmaceutical and appliance manufacturers are also greatly assisted by reliable statistics on illness and disability.

g Factors related to various diseases

Furthermore, statistical information of this kind is an additional tool for medical research. Study of data showing this relationship between certain economic, geographic or other factors and the various diseases indicate new avenues of exploration and suggest hypotheses for more precise testing.

3 Who uses the data

The principal users of the data are the United States Public Health Service, State and local health departments, public and private welfare agencies, medical schools, medical research organizations and corporations engaged in the manufacture of drugs and medical supplies. Many other organizations and individuals also use the data.

B Sponsorship of the Survey

The National Health Survey is sponsored by the United States Public Health Service, which is a part of the Department of Health, Education and Welfare. Because of the Bureau's broad experience in conducting surveys, we conduct the interviewing for the Public Health Service. The findings of the survey are analyzed and published regularly by the Public Health Service.

The National Health Survey is not a single survey but a continuing program of surveys which includes the following:

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- 1 The Health Interview Survey (HIS)

The Health Interview Survey, which is covered in this Manual, is the one which you will be working on most of the time. It is often referred to simply as "HIS" to distinguish it from the other surveys which are described below.
 - 2 The Health and Nutrition Examination Survey (HANES)

The Health and Nutrition Examination Survey, as the name suggests, collects health information primarily by means of an actual clinical examination. Census interviewing plays an important role in this survey in that it identifies the representative sample of persons who are to be asked to participate in the examinations. The latter are conducted by doctors and dentists from the Public Health Service.
 - 3 The Hospital Discharge Survey (HDS)

The Hospital Discharge Survey collects information on hospital stays for persons discharged from short stay hospitals, such as date of stay, age, race, sex, marital status, diagnosis, and operations.
 - 4 The Health Records Survey (HRS)

The Health Records Survey collects information on health and related services by examining the records in places in which people receive medical services, such as hospitals and other places which provide medical, nursing, and personal care.
- C Design of the HIS sample
- The Health Interview Survey is based on a sample of the entire civilian noninstitutional population of the United States. Over the course of a year, a total of approximately 40,000 households are interviewed. These households are located in the 50 states and the District of Columbia.
- 1 Selection of sample PSU's

The HIS sample is designed as follows:

 - (a) All the counties in the United States, as reported in the most recent Decennial Census, are examined.
 - (b) Counties which have similar characteristics are grouped together. These characteristics include geographic region, size and rate of growth of population, principal industry, type of agriculture, etc.

- (c) From each group, one or a set of counties is selected to represent all of the counties in the group. The selected counties (or sets of counties) are called primary sampling units, which we abbreviate to PSU. There are 376 PSU's in the HIS sample.

2 Sample ED's and segments

Within each PSU:

- (a) A sample of Census Enumeration Districts (ED's) is selected.
- (b) Each selected ED is divided into either small land areas or groups of addresses. These land areas and groups of addresses are called segments.
- (c) Each segment contains addresses which are assigned for interview in one or more samples. There are five types of segments: Area, Permit, Address, Cen-Sup, and Special place.

3 Sample units

Depending on the type of segment, you will either interview at units already designated on a listing sheet, or you will list the units at a specific address and interview those on designated lines of the listing sheet. In either case it is a sample of addresses, not persons or families.

4 Sample of newly constructed units

In areas where building permits are issued for new construction (Permit Areas), we select a sample of building permits issued since the last Decennial Census. These addresses are assigned as permit segments.

In places where no building permits are required (Non-Permit Areas), newly constructed units are listed and interviewed in area segments. In Non-Permit Areas, only Area segments are assigned.

5 Sample of special places

Some sample units are located in places with special living arrangements, such as dormitories, institutions, convents, or mobile home parks. Special place segments are composed of special places which were identified in the 1970 Decennial Census. Units in special places which were not identified as such in the 1970 Census may appear in Area and Address segments.

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6. The quarterly
sample

For purposes of quarterly tabulations of data, separate samples are designated for each quarter of the year. Each quarterly sample is then distributed into 13 weekly samples, of approximately equal size, so that any seasonal factors will not distort the survey results.

The sample designation identifies the calendar year and quarter in which sample units are interviewed. For example, 791 designates the sample beginning in January 1979; 792 designates the sample beginning in April 1979, etc.

D Scope of the survey

Each year, health information is gathered for every civilian person in 40,000 sample households. Adult residents, found at home at the time of your call, provide the information required.

The questionnaire for the survey provides for certain information to be collected on a continuing basis. In addition to this basic information, supplemental inquiries are included from time to time in order to provide information on special topics. Any one supplemental inquiry may be repeated at regular intervals, or may be used only once.

E Information accorded
confidential treatment

All information which would permit identification of the individual is held strictly confidential, seen only by persons engaged in the National Health Survey (including related studies carried out by the Public Health Service) and not disclosed or released to others for any other purpose.

CHAPTER 2

YOUR JOB PERFORMANCE IN HIS

A General

As an interviewer for the Health Interview Survey you will be assigned to work in one of the sample areas (PSU's). Your duties will be much the same on each assignment, although you may also perform various functions in different parts of the sample area.

B Basic field duties

It will be your responsibility to perform field duties of the following types:

- 1 Listing or updating units at time of interview in address and Take All (TA) places in special place segments.
- 2 Prelisting or updating area segments and Non Take All (NTA) places in special place segments.
- 3 Interviewing at units designated for the current sample in various types of segments.

You will interview households mainly by personal interview and occasionally by telephone. Courtesy and discretion at all times are especially important in gaining the confidence and cooperation of the respondents.

C Additional duties

You will also be expected to:

- 1 Be available for day and evening work.
- 2 Read instructional material and complete problem exercises.
- 3 Complete your assignment within a prescribed period of time.
- 4 Make weekly transmittals of completed work to your office.
- 5 Keep an accurate daily record of the work you do, the time you spend, and the miles you travel.

6 Meet the standards of accuracy and efficiency described below.

Standards of performance for interviewers

The Health Interview Survey is operated on a fixed budget which means that every phase of the survey must be conducted in the most efficient way. Otherwise, it will be impossible to conduct the survey or to continue the employment of the persons assigned to it.

The success of HIS depends on each interviewer getting and recording accurate and complete information. Otherwise, no amount of review or correction can improve the reliability of the results. Equally important, if you do not complete your assignments efficiently in the prescribed time period, the survey cannot be conducted within its time schedule or its budget.

Standards of performance have been established so that each interviewer will know what is required.

1 Production standards

We have determined the amount of time (based on past experience of HIS interviewers) required to complete each assignment accurately at a reasonable working pace. This standard, which includes time for travel, listing, interviewing, and other required activities, will be compared with the amount of time you actually take for the assignment, to see how efficiently you are performing your work.

Always begin on Monday of "interview" week and complete your interviews as soon as possible during that week. Completion of your assignment within the specified time is not only important from a cost standpoint, but is also essential in order to meet production deadlines.

a Planning your travel route

The time and mileage spent in traveling from one segment to the next is one of the major costs of the survey. Hold travel to a minimum by carefully planning which segments to visit on a particular day and the order in which to visit them.

b Reduction
of
callbacks

Costs and timing are also affected by the number of callbacks (revisits to an address) required. You may find that your rate of production is relatively high during the first few days of interviewing because somebody is at home at most of the addresses you visit. However, production may fall off if you have scattered callbacks. You can minimize this by planning your initial visits at the most productive time, and by tying in callbacks with remaining initial visits to the same part of the sample area.

Where a household is not at home at your first visit, make a careful inquiry of neighbors, janitors, etc., to find out when would be the best time to call back.

c Efficient
conduct of
interviews

Another time saver is the efficient conduct of interviews. If you are thoroughly familiar with the sequence of items on the HIS-1 questionnaire, and how to fill each one, you can conduct a rapid and efficient interview without sacrificing accuracy. Be prepared to explain the purpose of the survey briefly and clearly, how the information is used, and related subjects. You will be given copies of publications which you can show the respondent to help you in your explanation. You should also save any articles from local newspapers or magazines that report results of Census survey work in association with the National Center for Health Statistics.

2 Quality of
interviewing

No matter how efficiently the survey is conducted, the results may be seriously affected by incomplete, or inaccurately filled, listing and interview forms. In rating interviewers, the quality of their work is given as much weight as their productivity. This manual, and other materials which will be provided, contain all of the instructions needed to list and interview. Learn how to use the manual to look up unfamiliar things. Also, learn how to use the INTERviewer COMMUNICATION to advise your office of special situations or problems.

a Interviewer's error rate

Each week, your supervisor will give you a report of errors detected in the course of reviewing your work. The report will specify steps you should take to avoid similar errors in the future. Serious and frequent errors can be eliminated if you are thoroughly familiar with the instructions, and if you ask the questions on the questionnaire in a uniform and consistent fashion.

b Field evaluation of interviewer's work

Aside from office review, there will be field observation of each interviewer's listing and interviewing work. From time to time you will be observed by your supervisor, as you actually perform these duties. Your office will also reinterview some of your households to be sure that you obtain accurate and complete information.

3 Performance rating

Each quarter, your supervisor will tell you how your performance in the preceding quarter compared with the production and mileage allowances, and how you may improve your performance. The administrative handbook for interviewers gives standards of performance, and tells how to accurately complete payroll and other administrative forms.

HIS-100
(1979)

PART D

HOW TO INTERVIEW HIS

CHAPTER 1. INTRODUCTION

This chapter contains a general description of the questionnaire and the related survey materials, the interviewing sequence, and general instructions for using the questionnaire.

A. Description of Materials

1 HIS-1 Questionnaire

- a Purpose - The HIS-1 is the basic document used in the Health Interview Survey. In it you will record pertinent information reported during the interview. The tabulated responses from the questionnaires for all of the sample households become the basis for statistical reports about the health of the Nation.
- b Contents and Layout - The questionnaire contains several types of pages. Each type covers a certain kind of information.
 - 1) Household Page - The Household page is the front cover of the questionnaire. This page contains identification information and questions about the residence of the sample household.
 - 2) Probe Pages - Pages 2-17 are called "Probe" pages because they contain questions which are designed to "pick up" disability, activity limitations, illness conditions, doctor visits, hospitalizations, etc.

Pages 2 and 3 of the questionnaire contain probe questions about restricted activity and the conditions causing the restriction. Two-week accidents and injuries and dental visit questions are on pages 4 and 5. Pages 6 and 7 contain questions about doctor visits. Pages 8 and 9 contain questions about activity limitations. Pages 10 and 11 contain questions about hospitalizations. Pages 12-15 contain lists of certain selected conditions. Pages 16 and 17 contain a general health question and questions about bed days during the past 12 months, comparative health status and a respondent check item.

- 3) Condition Page - There are six Condition pages (18-29). These pages consist of questions designed to gather detailed information about illnesses and injuries reported in response to the probe questions.
- 4) Doctor Visits Page - This page (30 and 31) consists of questions about visits or calls to a doctor within the past two weeks.
- 5) Hospital Page - This page (32 and 33) consists of questions about hospitalizations within the past 12 or 13 months.

- 6) Home Care Pages - These pages (34-39) consist of questions concerning the need for assistance from another person or the use of special aids in performing daily functions.
- 7) Individual Home Care Page - This page (40 and 41) consists of questions about persons who have indicated the need for assistance from another person in performing daily functions.
- 8) Immunization Page - This page (42 and 43) consists of questions concerning immunization against various childhood diseases for persons under 17.
- 9) Eye Care Pages - These pages (44 and 45) consist of questions concerning visits to providers of eye care and are asked only of sample persons.
- 10) Residential Mobility Page - This page (46 and 47) consists of questions concerning the relationship between residential mobility and health status for those persons aged 17+ who are dependent on others for help in performing daily functions and for sample persons 17+.
- 11) Person Pages - Pages 48-55 obtain personal information about each household member. Pages 48 and 49 contain questions about education, veteran status, race and ethnic origin. Pages 50 and 51 obtain information on work status. Pages 52 and 53 contain questions on medicaid, family income and certain supplementary income. Pages 54 and 55 also obtain information on supplementary income.
- 12) Table X, Item E - This page (56) consists of questions to determine if additional living quarters at this address are part of the sample unit or an EXTRA unit.
- 13) Smoking Supplement - This separate supplement consists of questions to determine the smoking habits of sample persons 17+.

c Format

- 1) The Probe pages, Home Care, Immunization, Residential Mobility and the Person pages are arranged in seven-column format. Ask the respondent the questions on the left side of the page; enter the answers in the six numbered columns for each person. Record the answers for each person in the correct column on each of these pages.
- 2) Each Condition page consists of two facing pages containing questions about a single condition.
- 3) The Two-Week Doctor Visits page, Hospital and Individual Home Care pages are also arranged in columnar format. Ask the questions on the left side of the page; answer space is provided in the four columns to the right of the questions on each page.
- 4) Each Eye Care page consists of two facing pages containing questions concerning eye care for sample persons.


2 Information Card Booklet

The flashcard booklet is made up of a group of cards to be used in completing the interview. Some of the cards are shown to the respondent while others are used only by you, the interviewer. Have a second flashcard booklet for the respondent's use so that the necessity of passing the booklet back and forth can be reduced to a minimum.

- a The inside of the front cover, Card EM, contains a summary table for determining who to include as a household member.
- b Use Card A, the Age Verification Chart, in probe question 3 to determine the person's age.
- c Show Card 1, 2, 3, 4, 5, or 6 (question 32) to the respondent when asking the condition list in Spanish speaking households.
- d Card C is a list of illness conditions for which questions 3a-e on the Condition page need not be asked.
- e Use Cards E1-E3 as guides when editing the Condition and Hospital Pages.
- f Show Cards R and O to the respondent when asking the race and origin questions (4 and 5) on the person pages. There are English and Spanish versions.
- g Show the Medicaid card to the respondent when asking question 11. There is a flashcard listing the States and alternative names that may be used.
- h Card I is a list of income groups shown to the respondent when asking the income questions (12 and 14). There are Spanish and English versions.
- i There are yearly calendars for 1978 and 1979 and a card giving the dates of various holidays in 1978 and 1979.
- j There is a card containing a list of items to fill for extra questionnaires.
- k There is a card containing the listing statement and some verification examples.
- l There is a sample person card from which you will select the sample person(s).
- m On the inside back cover are the rules for selecting the Eye Care page respondent.
- n On the outside back cover is a brief explanation of the Health Interview Survey.

A

3 Calendar Card


UNITED STATES
HEALTH INTERVIEW SURVEY
1978-1979

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
DECEMBER 1978						1	2
	3	4	5	6	7	8	9
	10	11	12	13	14	15	16
	17	18	19	20	21	22	23
	24	25	26	27	28	29	30
	31						
JANUARY 1979		1	2	3	4	5	6
	7	8	9	10	11	12	13
	14	15	16	17	18	19	20
	21	22	23	24	25	26	27
	28	29	30	31			

○ Hal-days

Red line (the past two weeks) →

Week 01 - 791 (interview week) →

A separate calendar card is furnished with each week's assignment. Hand the card to the respondent and refer to it at different times throughout the interview to remind the respondent of a particular two-week period. Before starting each interviewing assignment, prepare two or three calendar cards by outlining the dates of the two-week reference period in red. The beginning and ending dates should correspond with the two-week dates stamped in questionnaire item C2 by your Regional Office.

Use a ruler or straight edge to mark off the two-week period on the calendar card. Use a sharp red pencil or a pen with red ink.

B General Interviewing Instructions

1 Symbols, Type Face, and Use of Pronouns

In order to become familiar with the questionnaire, you must learn the meaning of the different kinds of symbols and type face used on the questionnaire.

a Symbols Used - The following symbols are used throughout the questionnaire:

- 1) Use of Three Dots - Where three dots (...) appear, insert the name of the illness, accident, or injury which you are talking about. This aids the respondent in answering the questions especially when several illnesses have been reported.

4. During the past 2 weeks, did his ... cause him to cut down on the things he usually does?

- 2) Use of Two Dashes - Where two dashes (--) appear, insert the name of the person, relationship, the number, or whatever is appropriate for the question.

6. During these 2 weeks, how many days did illness or injury keep -- from school?

- 3) Use of One Dash - Where a single dash (-) appears, pause and then continue with the remainder of the question.

3a. What did the doctor say it was? - Did he give it a medical name?

- 4) Wording in Parentheses - These are either alternative or additional wordings of a question and are used, as appropriate, for a particular situation.

18a. During the past 12 months, (that is since (date) a year ago), about how many times did -- see or talk to a medical doctor? (Do not count doctors seen while a patient in a hospital.) (Include the -- visits you already told me about.)

- 5) Words in Brackets - These vertically aligned words or phrases within brackets are alternatives from which one or more is to be selected.

10a. What condition caused -- to	<table border="1"> <tr> <td>stay in bed</td> </tr> <tr> <td>miss work</td> </tr> <tr> <td>miss school</td> </tr> <tr> <td>cut down</td> </tr> </table>	stay in bed	miss work	miss school	cut down	during the past 2 weeks?
stay in bed						
miss work						
miss school						
cut down						

- 6) Skip Instructions - Numbers or letters in parentheses following answers or check boxes indicate the question to go to next. If the question is not applicable, go to the next question, person, or whatever is appropriate. If no skip instruction is given, continue with the next question. (NP) means "next person;" (NC) means "next condition."

10a.	<input type="checkbox"/> Under 17 (NP)
	<input type="checkbox"/> None (NP)
	Elem: 1 2 3 4 5 6 7 8
	High: 9 10 11 12
	College: 1 2 3 4 5 6+
b.	1 Y 2 N

13a.	<input type="checkbox"/> Under 17 (NP)
	1 Y (14) 2 N
	b. 1 Y 2 N
	c. 1 Y 2 N (14)
d.	1 <input type="checkbox"/> Looking 3 <input type="checkbox"/> Scr- 2 <input type="checkbox"/> Layoff

A4	<input type="checkbox"/> Accident or injury	<input type="checkbox"/> Other (NC)
----	---	-------------------------------------

- b) Print Type Used - The questions you ask of the respondent appear in heavy black type. Instructions to you appear in italics or light face type. Stress words or phrases in capital letters when asking the questions.

27a. Is -- limited in ANY WAY because of a disability or health?
b. In what way is he limited? Record limitation, not condition.

c) Use of Pronouns

- 1) Address the respondent by the proper title, e.g., Mr., Mrs., Miss, etc., unless specifically requested by the respondent to use his first name. When asking about other adult members of the family, substitute appropriate pronouns, such as "he" or "she," or use the relationship of the person involved.

B1

- 2) If you are interviewing in a one or two person household, substitute "you" or "you and your husband", etc., for the phrase "anyone in the family."
- 3) For children under 17, change the question(s) to "During the past 2 weeks how many times did anyone (you) see a medical doctor about John?" or "When did anyone (you) first notice Mark's ear infection?"

2 How to Make Entries

a Make written entries wherever a write-in space is provided for a written entry, for example, effects of allergy.

For allergy or stroke, ask
d. How does the allergy (stroke) affect him?

runny nose

b Wherever a "check box" is provided, enter an "X," as appropriate.

H

0 Under 17
1 At home
2 Not at home

c Where "Y" or "N" appears, circle the "Y" for "Yes," or the "N" for "No."

These next questions are about how well — can see (with glasses/contacts).

10a. Can — see well enough to read ordinary newspaper print with:
his { left eye? Y N
right eye? Y N

d When reasking a question, you must circle "N" if "Y" is circled.

11e. During the past 2 weeks, did anyone in the family, that is you, your —, etc., have any (other) accidents or injuries? N (12)

b. Who was this? — Mark "Accident or injury" box in person's column.

c. What was the injury?

d. Did anyone have any other accidents or injuries during that period? N
If "Accident or injury," ask:
e. As a result of the accident, did — see a doctor or did he cut down on the things he usually does?

- e If "Y" is circled or the "Yes" box marked, also circle "N" or mark "No" to show the question is complete even if it is not asked, for example, in a one person household.

(Besides these visits)

15a. During that 2-week period did anyone in the family go to a doctor's office or clinic for shots, X-rays, tests, or examinations? N (16)

b. Who was this? - Mark "Doctor visit" box in person's column.

c. Anyone else? Y (Reask 15b and c)

If "Doctor visit," ask

d. How many times did -- visit the doctor during that period?

- f Use two digits for month and date entries.

You said that -- was in the hospital (nursing home) during the past year.

2. When did -- enter the hospital (nursing home) (the last time)?

USE YOUR CALENDAR
Make sure the YEAR is correct

Month: 01, Date: 02, Year: 1978

19. Record of calls

Month	Date	Beginning time	Ending time	Completed (X)
	06 20	a.m.	a.m.	
		p.m.	p.m.	

- g Some questions require a written entry for length of time in months or years. Enter whole numbers as reported, dropping any fractions. If the response is a number of months greater than 12, divide it by 12 and round down to the nearest number of years.

- 1) If the answer is "Eighteen months," enter:

800 Less than 1 month

28a. 1 ___ Mos. 2 1 Yrs.

- 2) If the answer is "Six weeks," enter:

800 Less than 1 month

28a. 1 1 Mos. 2 ___ Yrs.

B2

- h Don't Know - In answering questions, the respondent may indicate that the answer is unknown. If, after probing, you still cannot obtain an answer, the entry in the answer space for that question must indicate that the respondent doesn't know the answer. Either write "DK" (don't know) in the answer space or mark "DK."

3. What is the name and address of this hospital (nursing home)?	Name	Castroville Mem.
	Street	DK
	City (or county) State	Dallas Okla.

2. When did -- last see or talk to a doctor about his ...?				
In interview	1	Fast 2 wks. (Item C)	8	2-4 yrs.
week	2	2 wks.-6 mos.	6	5 yrs.
(Reas. 2)	3	Over 6-12 mos.	7	Never
	4	1 yr.	9	DK if Dr. seen
			5	DK when Dr. seen

i Interval

- 1) Boxes are provided for intervals in several places. If the respondent does not provide enough information to mark the right box, ask additional questions. For example, if the respondent says "Six months ago" in response to question 2 on the Condition page, find out whether it was less than six months or more than six months ago, then mark the appropriate box, that is, "2 wks.-6 mos." or "Over 6-12 mos." It is necessary to probe any time the respondent gives an answer which falls on the borderline, such as "Two weeks ago," "Six months ago," "One year ago." If the answer falls exactly at the breaking point, for example, exactly 6 months ago, mark the lower category, in this case "2 wks.-6 mos."

2. When did -- last see or talk to a doctor about his ...?				
In interview	1	Fast 2 wks. (Item C)	8	2-4 yrs.
week	2	2 wks.-6 mos.	6	5 yrs.
(Reas. 2)	3	Over 6-12 mos.	7	Never
	4	1 yr.	9	DK if Dr. seen
			5	DK when Dr. seen

- 2) Sometimes in answer to certain questions requiring a single numerical entry, the respondent may not be able to give an exact number but may answer in terms of a range or interval. You may have to assist in making an estimate. For example, you might ask, "How many days during a month did your ... usually keep you in bed; how many months was this the pattern?" or the same type of question might be asked in terms of weeks. In such cases, try as tactfully as possible to obtain a specific number, even if it is an estimate. However, do not force the issue to the point where it harms the interview. If the final answer is an interval or range, for example, "From 10 to 12," then record "10-12" in the answer space.

Ask of 17+ years	
7. How many days did his ... keep him from work during that 2-week period? (For females): not counting work around the house?	10-12 Days (9) None (0)

- j "None" Entries - Mark the "None" box when an answer of "None" is received to one of the questions. If there is no "None" box, enter a dash (—) in the answer space.

This survey is being conducted to collect information on the Nation's health. I will ask about visits to doctors and dentists, illness in the family, and other health related items. (Hand calendar)		
The next few questions refer to the past 2 weeks, the 2 weeks outlined in red on that calendar, beginning Monday, _____ (date), and ending this past Sunday, _____ (date).		
5a. During these 2 weeks, did — stay in bed because of any illness or injury?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N	If age: 17-76 } 6-16 (7) Under 6 } 9
5b. During that 2-week period, how many days did — stay in bed all or most of the day?	— Days	

6. During these 2 weeks, how many days did illness or injury keep — from work? (For females): not counting work around the house?	— WL days (8) or <input checked="" type="checkbox"/> None (9)
---	--

- k Corrections - Do not erase an entry since it is often impossible to distinguish between the erasure and the intended entry. Make corrections of the entries in the questionnaire as follows:

- 1) Line out an incorrect written entry and write the correct entry above it.

For a fever or stroke, ask
d. How does the allergy (stroke) affect him?
Roller sneezes

B2

- 2) If a check box has been marked incorrectly, draw a circle around the incorrect entry, then mark the correct box, or make the correct entry.

9. When did -- first notice his ...?	
<input checked="" type="checkbox"/> 1st week	<input type="checkbox"/> 2 weeks-3 months
<input type="checkbox"/> 2 week before	<input type="checkbox"/> Over 3-12 months
<input type="checkbox"/> Past 2 weeks-DK which	<input type="checkbox"/> More than 12 months ago
(Was it during the past 12 months or before that time?)	
(Was it during the past 3 months or before that time?)	
(Was it during the past 2 weeks or before that time?)	

Ask if 6-16 years.	
8. How many days did his ... keep him from school during that 2-week period?	<input checked="" type="checkbox"/> 1 Days <input type="checkbox"/> None

- 3) Line out an incorrect numerical entry and enter the correct number.

5. During that period, how many days did he cut down for as much as a day?	<input checked="" type="checkbox"/> 2 Days <input type="checkbox"/> None (0)
--	---

- 4) Line out an incorrectly circled entry and circle the correct answer.

4. During the past 2 weeks, did his ... cause him to cut down on the things he usually does?	<input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3
--	---

3 More Than One Questionnaire

a The number of questionnaires needed in a household will depend on household composition and on how many conditions, doctor visits, and hospitalizations are reported for that household. Additional questionnaires will be needed for a household if any of the following occurs:

- 1) There are more than six related persons in the household.
- 2) There are household members not related to the head of the household.
- 3) There are more than six conditions or four two-week doctor visits or four hospitalizations.

- B3
- 4) There are more than four persons 17+ years old or over for whom you have marked the "H" box.
 - 5) There are more than two sample persons (Eye Care page) or a sample person had more than two eye care visits during the reference period.
- b If a second questionnaire is required because of 3), 4), or 5) above, use the pages of the first questionnaire to record the information as long as there is room. Only when all of the pages of a particular type are filled in the first questionnaire is the second questionnaire needed.
 - c Complete a separate questionnaire for each unrelated household member or family group, including noninterviewed persons.

4 Shaded Areas (Zipitone)

- a Make no entries in these areas.
- b Ask the questions above these areas for each person before going to the question below the shaded area for the first person.

14. During the past 2 weeks (the 2 weeks outlined in red on that calendar) how many times did -- see a medical doctor?	14	00 = None Number of visits } NP
(Besides these visits)		
15a. During that 2-week period did anyone in the family go to a doctor's office or clinic for shots, X-rays, tests, or examinations?	Y N (16)	
b. Who was this? -- Mark "Doctor visit" box in person's column.	15b.	Doctor visit

5 Persons Under 17

Mark the "Under 17" box for persons under 17 years of age regardless of marital status, work status, etc.

H	<input checked="" type="checkbox"/> Under 17
	<input type="checkbox"/> At home
	<input type="checkbox"/> Not at home

6 Events Occurring During Past Two Weeks

- a Do not include any illness, hospitalization or health-related event starting during interview week no matter how serious it might be. If you record something of this kind and afterwards learn that it should not have been recorded, delete or correct the entry, as appropriate, and explain the deletion in a footnote.

B6

- b This rule does not apply to household membership or personal characteristics, such as age, marital status or membership in the Armed Forces, all of which apply as of the time of interview.

7 Footnotes and Comments

- a Relevant and precise footnotes or comments are often helpful to the processors in coding various parts of the questionnaire or in solving problems which arise out of inconsistencies or omissions, estimates, etc. When possible, make notes or comments near the answer box containing the entry to which the explanation or comment applies or in the footnote space.
- b When you footnote an explanation or comment, indicate to which entry that explanation or comment applies. Do this by writing the number of the footnote, for example, "1/" both at the source of the footnote and next to the footnote itself.

18a. During the past 12 months, (that is since (date) a year ago), about how many times did -- see or talk to a medical doctor? (Do not count doctors seen while a patient in a hospital.) (Include the -- visits you already told me about.)	18a. <input checked="" type="checkbox"/> Only when in hospital <input type="checkbox"/> None Number of visits
b. ABOUT how long has it been since -- LAST saw or talked to a medical doctor? Include doctors seen while a patient in a hospital. <i>if only visit while in hospital just 2 wks.</i>	b. <input type="checkbox"/> 2-week DV <input checked="" type="checkbox"/> Past 2 weeks not reported (14 and 17) ↓ <input type="checkbox"/> 2 wks.-6 mos. <input type="checkbox"/> Over 6-12 mos. <input type="checkbox"/> 1 year <input type="checkbox"/> 2-4 years <input type="checkbox"/> 5+ years <input type="checkbox"/> Never

8 How to Record Answers

In the interest of accuracy, record all answers on the questionnaire exactly as they are obtained from the respondent at the time they are reported. It is extremely important that entries are legible and clearly understandable.

C Conducting the Interview

- 1 The materials needed to conduct an interview are: HIS-1 Questionnaire, Smoking Supplement, HIS-501 Information Card Booklet, Segment Folder, Calendar Card, and "Thank You" letter.

C

- 2 When you receive your assignment from the Regional Office, complete each interview in the following manner:
 - a Step 1 - Check Section 1 of the Segment Folder to determine if you must list (or update) only, list (or update) and interview, or interview only. If listing (or updating) is required, proceed according to the instructions in Part C of this manual for the particular type of segment. If interviewing only is required, check the address of the current sample unit on the listing sheet in the Segment Folder to make sure that this address appears in item 6a of the questionnaire.
 - b Step 2 - When you begin the interview, verify the sample address with the respondent. Ask "YEAR BUILT" if required, and questions 8 and 9 as applicable. Complete Table X, if required.
 - c Step 3 - Complete probe questions 1-item H. Hand the Calendar Card to the respondent, ask questions 5-34 and complete item R.
 - d Step 4 - Complete a separate Condition page for each condition listed in item C2.
 - e Step 5 - Complete a column of the Doctor Visits page for each doctor visit indicated in item C1.
 - f Step 6 - Complete a column of the Hospital page for each hospitalization indicated in item C1.
 - g Step 7 - Complete the Home Care pages.
 - h Step 8 - Complete the Individual Home Care page for each person who has been reported as needing the help of another person in performing daily functions. ("H" box marked above their column.)
 - i Step 9 - Complete the Immunization page.
 - j Step 10 - Complete the Eye Care page for each sample person.
 - k Step 11 - Complete the Residential Mobility page.
 - l Step 12 - Complete the Person pages, using Card R with question 4, Card O with question 5, the sample medicaid card with question 11 and Card I with questions 12 and 14.
 - m Step 13 - Complete the Household page, items 10-21 and review the questionnaire for completeness.
 - n Step 14. Complete the Smoking Supplement for each sample person aged 17+.
 - o Thank the respondent and leave the "Thank You" letter.

CHAPTER 2. HOUSEHOLD PAGE

Chapter 2 describes how and when to fill each item on the Household page.

①

Item 1, Book of Books

①

1. Book _____ of _____ books

If you use only one questionnaire for a household, fill this item to read, "Book 1 of 1 books." If you use two questionnaires, fill item 1 on the first questionnaire to read, "Book 1 of 2 books" and the second, "Book 2 of 2 books. Make corresponding entries when three or more questionnaires are used. Complete the entries in item 1 after the interview.

② — ⑤

Items 2 through 5, Identification

② — ⑤

2. F.O. number	3. Sample	4. Segment type	5. Control number		
		<input type="checkbox"/> Area <input type="checkbox"/> Permit <input type="checkbox"/> Address <input type="checkbox"/> Cen-Sup <input type="checkbox"/> Special place	PSU	Segment	Serial

- 1 These items are filled in advance by the office. They identify the sample units.
- 2 EXTRA Units - Transcribe from the questionnaire for the original sample unit, items 2-5, except for serial number. Leave the space for serial number blank, as this is assigned later by the office.
- 3 Two or More Questionnaires for One Household - For second and additional questionnaires prepared for the household, transcribe items 2-5, including serial number, from the first questionnaire for the household.

6

Item 6, Address

6

6a. What is your exact address? (Include house No., Apt. No., or other identification and ZIP code)				Listing Sheet
-----				Sheet No. _____
City	State	ZIP code	County	Line No. _____
Is this your mailing address? <input type="checkbox"/> Same as 6a Mark box or specify if different. Include ZIP code.				

City	State	ZIP code	County	
e. Special place name		Sample unit number	Type code	

- 1 After your introduction, verify the address in 6a before beginning the interview by asking "What is your exact address?"
 - a Make corrections and additions, including the ZIP code, as necessary. Cross out, DO NOT ERASE, incorrect entries and write the correct entry above it. Any address correction made in 6a must also be made on the listing sheets as instructed in Part C.

NOTE: In area segments, you will often find a descriptive address entered in 6a, such as "White house with green shutters, etc." DO NOT cross out this entry. In these cases, the respondent will most likely respond to question 6a by giving you the mailing address, such as a box number, route number, or a house number and street name, which may not have been visible at the time of listing. Enter the information in item 6b, and then ask the item 6b question.
 - b For EXTRA units, fill item 6a with an accurate unit description so that the EXTRA unit can easily be distinguished from the original unit.
- 2 After the respondent answers 6a, ask item 6b. "Is this your mailing address?"
 - a If the address in 6a is identical to the mailing address, mark the box "Same as 6a" in 6b. If there are any differences, enter the complete mailing address in item 6b, if you have not already done so, as described in the NOTE above. ALWAYS include the ZIP code in 6b.
 - b The mailing address should be as complete as possible, for example, an adequate urban mailing address includes house number (and apartment number, if any), street, name of city supplying postal service, and ZIP code. In rural areas, an adequate mailing address includes route no. (box no., if any), name of Post Office, and ZIP code. General delivery or box no. and P.O. city and ZIP code are also acceptable mailing addresses.

6

Address (Continued)

6

NOTE: In completing 6a and/or b, if the address is in a State that has parishes or townships, instead of counties, substitute these for the county. If it is an independent city not within any county, enter the city name in the space for "County."

- 3 Item 6c is filled by the office for units in special places. If at time of interview you find a regular unit is actually a unit in a special place, fill the space labeled "Special place name."
 - a See Part C, Topic 37 for information on special place procedures. A complete list and description of the types of special places is given in Part C, Table A.
 - b For EXTRA units, transcribe the special place name from item 6c on the HIS-1 for the original sample unit to item 6c on the new HIS-1 for the EXTRA unit.

7

Item 7, Year Built

7

7. YEAR BUILT <input type="checkbox"/> Ask \rightarrow		<input type="checkbox"/> Do NOT Ask
When was this structure originally built?		
<input type="checkbox"/> Before 4-1-70 (Continue interview)	<input type="checkbox"/> After 4-1-70 (Go to 9c. complete if required and end interview)	

1 The HIS sample is kept up to date by supplementing the sample of addresses obtained from the 1970 Census with a sample of building permits issued since April 1, 1970. The selected permit addresses are included in the survey as permit segment addresses. In area segments that are located in permit-issuing areas, each newly constructed unit must be deleted from the sample. Otherwise, it could have a chance to come into sample more than once. See Part C, Topic **52** for more information about YEAR BUILT.

2 Item 7 is marked by the office. If the ASK box is marked, ask item 7 for both vacant and occupied units. If the unit is a noninterview, try to get the information from a knowledgeable person, such as an apartment manager or long-term resident of the neighborhood. All sample units in a multi-unit structure are considered built at the same time.

YEAR BUILT refers to the date the original structure was completed, not the time of later remodeling, additions, or conversions. Consider construction as completed when all the exterior windows and doors have been installed and the final usable floors are finished so that the unit is ready for occupancy.

a If the structure containing the sample unit was built before 4-1-70:

- 1) Mark the Before 4-1-70 box.
- 2) Continue the interview.

b If the structure containing the sample unit was built after 4-1-70:

- 1) Mark the After 4-1-70 box.
- 2) Ask item 9c, if required.
- 3) End the interview.
- 4) Mark the Type C noninterview reason, "Built after April 1, 1970," in item 18.

⑦ Year Built (Continued) ⑦

3 EXTRA Units

- a Determine YEAR BUILT for EXTRA units in area segments in permit areas. If the EXTRA unit is in the same structure as the original sample unit, the YEAR BUILT is the same for both units.
- b Do not determine YEAR BUILT for EXTRA units in permit segments, special place segments, cen-sup, or area segments in nonpermit areas.
- c Determine YEAR BUILT for EXTRA units in address segments only if the EXTRA is in a different structure than the original unit, and the structure appears to have been built since April 1, 1970.

4 Exceptions - See Section F in Topic ⑤② in Part C.

⑧ Item 8, Type of Living Quarters ⑧

8. Type of living quarters	→	1 <input type="checkbox"/> Housing unit	2 <input type="checkbox"/> OTHER unit
----------------------------	---	---	---------------------------------------

Mark the box for Housing unit or OTHER unit according to the definitions given in Part C, Topics ①⑦ and ③① for Type A and Type B noninterviews as well as for interviewed units. Leave item 8 blank for Type C noninterviews.

Question 9, Coverage

9. Area segments GILY		
<input type="checkbox"/> a. Are there any occupied or vacant living quarters besides your own in this building?	Y (fill Table X)	N
<input type="checkbox"/> b. Are there any occupied or vacant living quarters besides your own on this floor?	Y (fill Table X)	N
<input type="checkbox"/> c. Is there any other building on this property for people to live in - either occupied or vacant?	Y (fill Table X)	N
<input type="checkbox"/> d. None		
GO TO PROBE PAGE 2		

- 1 Questions 9a-c are coverage questions which are asked only in area segments. They are intended to discover EXTRA units.
 - 2 Your office will indicate which of questions 9a-c you are to ask in area segments by marking the appropriate box(es) in question 9.
 - 3 If the "None" box is marked in 9d, omit question 9 entirely and go directly to question 1 on Probe page 2.
 - 4 If you find that a sample unit is a Type A or B noninterview, ask 9a, b, or c of a janitor, apartment manager, neighbor, etc. If you find that a sample unit is a Type C noninterview, ask question 9c (if it is marked) of a knowledgeable person in the area. Modify the question to refer to the noninterview unit. For example, in asking 9a of a neighbor, you should say, "Are there living quarters for more than one group of people in that vacant house next door?"
 - 5 If the answer to question 9a, 9b, or 9c is "No," go to question 1 on Probe page 2.
 - 6 If the answer to question 9a, 9b, or 9c is "Yes," fill Table X on the back of the questionnaire and then go to question 1 on Probe page 2. See Part D, Chapter 11, and Part C, Topic (43) for the procedure to follow.
- NOTE: If a unit was merged with a sample unit and later became unmerged, consider it as unlisted and treat it as an EXTRA to the sample unit.
- 7 EXTRA Units - Do not ask coverage questions for EXTRA units. For these units make no entries in question 9.
 - 8 Go to question 1 on page 2 after completing question 8, or question 9, if required. Complete the remaining questions on the Household page after the interview.

⑩ — ⑫ Item 10, Questions 11 and 12, Tenure and Land Use ⑩ — ⑫

10. Land use	<input type="checkbox"/> RURAL -- Regular units and Special Place units coded 85-88 in 6c. go to 11. -- Special Place units not coded 85-88 in 6c. go to 13.	<input type="checkbox"/> URBAN (13)	
11. Do you own or rent this place?	<input type="checkbox"/> Own	<input type="checkbox"/> Rent	<input type="checkbox"/> Rent for free
12a. Does this place you (own/rent/rent for free) have 10 acres or more?	<input type="checkbox"/> Y (12a)	<input type="checkbox"/> N (12a)	
b. During the past 12 months did sales of crops, livestock, and other farm products from this place amount to \$50 or more?	<input type="checkbox"/> Y (13)	<input type="checkbox"/> N (13)	
c. During the past 12 months did sales of crops, livestock, and other farm products from this place amount to \$250 or more?	<input type="checkbox"/> Y	<input type="checkbox"/> N	

1 Item 10 is marked by the office. For EXTRA units, mark the same box in item 10 that is marked for the original unit.

- a If the office has marked RURAL and the sample unit is either a regular unit or a special place unit coded 85-88 in item 6c, go to question 11.
- b If the office has marked RURAL and the sample unit is a special place unit not coded 85-88 in 6c, skip questions 11 and 12, and go to question 13. The office will automatically circle "N" in question 12c for these cases.
- c If the office has marked URBAN, skip questions 11 and 12, and go to question 13.

2 Question 11, (Tenure) Own, Rent, or Rent for Free

a Own - Mark "Own" if the owner or co-owner is living at the sample unit, even though the person is not the head of the household or is absent, such as a family member in the Armed Forces or temporarily working away from home.

- 1) Mark the "own" box even if the place is mortgaged or not fully paid for.
- 2) A cooperative apartment is owned only if the owner lives in it.
- 3) In the case of a trailer which is owned by the occupant but which is parked on rented ground, the land is considered to be the unit for the land usage question. Mark the box for "Rent" in such a case.

b Rent - Mark "Rent" if any money rent is paid or contracted for. The rent may be paid by persons not living in the unit, for example, a welfare agency.

- c Rent for Free - Mark "Rent for free" for places occupied rent free by persons in exchange for services rendered, such as a caretaker, a farm worker, or janitor who receives the use of a house or apartment instead of wages. Report a tenant farmer who does not pay money rent as occupying the unit "Rent for free."

3 Question 12, Sale of Farm Products from This Place

- a Question 12a - Ask question 12a by selecting the phrase in parentheses that matches the box marked in question 11.

- 1) The question "Does this place you (own/rent/rent for free) have 10 acres or more?" refers to the amount of land included in the PLACE which contains the sample unit.

In some cases the PLACE may be one sample unit consisting of a house and lot. In other cases it may consist of a whole tract of land or a combination of two or three pieces of land on which the sample unit is located.

If there is any question, consider as PLACE one or more tracts of land which the respondent considers to be the same property, farm (or ranch), or estate. These tracts may be adjoining or they may be separated by a road or creek or other pieces of land.

Explain the meaning of PLACE to the respondent if there seems to be some question.

- 2) More Than One Unit on Same Place - If there is more than one sample unit on the same place (as defined above), the answer for each unit must be the same. For example, an owner lives in one sample unit on a place of 150 acres; a hired hand lives rent free in a separate sample unit on the same place. The answer to question 12a would be "Y" (Yes) for each unit. Remember again, however, that if there is a cash renter on this property, we are referring only to that land which is rented.

- 3) If Place is Definitely in Built-Up Area - There may be certain areas coded RURAL which have been built up into apartment areas, suburban housing developments, and the like. In such cases where the place is obviously a private home on a lot or an apartment, circle "N" without asking these questions.

If the sample unit is in a rural (not built-up) area, ask the question, even if the unit appears to be just a house and lot.

⑩—⑫ Tenure and Land Use (Continued)

⑩—⑫

- b Question 12b, Sale of Produce (\$50 or More) - It is not necessary to find out the precise amount, so long as the answer can be classified as \$50 or more, "Y," or less than \$50, "N." Note that the question refers to gross sales during the past 12 months. If questions arise on the meaning of sales from this place, use the following as a guide:
- 1) Sales from This Place - By sales of crops, livestock and other farm products is meant the gross amount received for the sale of crops, vegetables, fruits, nuts, livestock and livestock products (milk, wool, etc.), poultry and eggs, nursery and forest products produced on this place.
 - 2) Place - The place is the same as that referred to in question 12a.
 - 3) More Than One Unit - If there is more than one sample unit on a place (remembering how place is defined differently for owners and renters), the answer for each unit must be the same. For instance, the owner lives in one unit on a place of 15 acres with total sales amounting to \$780. A hired hand lives rent free in a separate unit on the place. Each of the two units would have "Y" in question 12a and "Y" in question 12b.
 - 4) Special Situation - If the respondent has recently moved to the place and has not sold any farm products, explain that this question refers to sales made from this place during the past 12 months, either personally or by someone else. If the person is unable or unwilling to make an estimate, enter "DK" (don't know).
- c Question 12c, Sale of Produce (\$250 or More) - In completing question 12c, follow the same instructions as were given for question 12b for sales, definition of place, more than one unit and the special situation. The only difference is that question 12c refers to sales of \$250 or more. The higher amount of sales from a place of less than 10 acres is required for it to be classified as a farm. If the place is obviously a private home on a lot or an apartment, circle "N" in question 12c without asking the question.

13

Question 13, Number of Rooms

13

13. How many rooms are in this --? Rooms
Count the kitchen but not the bathroom.

- 1 Use an applicable term, such as trailer, house, your living quarters, etc., when asking the question. If there are several housing units in a structure, make sure that the rooms you are counting are only for the housing unit you are interviewing.
- 2 Count only whole rooms, such as living rooms, dining rooms, kitchen, finished basement or attic rooms, recreation rooms, permanently enclosed sunporches, bedrooms, or other rooms suitable or used for living purposes. Count as a separate room a dinette, kitchenette, or "half-room" which is partitioned off from floor to ceiling; but count as only one room a kitchenette and dinette separated only by shelves or cabinets. Rooms equipped with movable partitions from floor to ceiling are separate rooms.
- 3 Do not count bathrooms, strip or pullman kitchens, halls or foyers, alcoves, pantries, laundries, closets or storage space, unused basement or attic rooms not suitable for living quarters, or porches, unless they have been permanently enclosed and are suitable for year-round use.

14

Question 14, Number of Bedrooms

14

14. How many bedrooms are in this --? Bedrooms
If "None" describe in footnotes.

- 1 Enter in question 14 the number of rooms in the unit which are mainly used as bedrooms. A bedroom is a room intended primarily to be slept in. In some houses, the upper floor can be made into one or more bedrooms; consider such quarters as bedrooms only if they are finished off. Do not count as a bedroom a combination bedroom-living room or a den which is intended primarily for purposes other than sleeping.
- 2 For purposes of filling questions 13 and 14, one room units are always considered as having one room (question 13) and no bedrooms (question 14). In this case enter a dash in question 14. Describe the situation in the footnote space, for example, "one room apartment."

15

Question 15, Telephone Number

15

15. What is the telephone number here? a <input type="checkbox"/> None	Area code/number
---	------------------

Ask question 15 and enter the telephone number including the area code in the space provided. If the household has a telephone but the number is not obtained, enter the reason. Mark the "None" box only for those cases where there is no telephone in the household. If the respondent asks why you want the number, explain that the number will save the expense and time of a personal callback if you find that some needed information is missing.

Items 16 and 17

16 — 17

Interview Observed, Interviewer's Name and Code

16 — 17

16. Was this interview observed? 1 Y 2 N
--

17. Interviewer's name	Code
------------------------	------

- 1 Item 16, Observed Households - Fill item 16 for all households.
- 2 Item 17, Name and Code of Interviewer - Sign your name in the space provided on all questionnaires after you have completed the entire interview for a household or are turning in the questionnaire as a final noninterview. Also, enter the code which has been assigned to you by your office.

Item 18, Noninterviews

18. Noninterview Reasons	
TYPE A	
1 <input type="checkbox"/> Refusal - Describe in a footnote	} Fill items 1-6a, 7, 8, 10, 12c as applicable, 15-19
2 <input type="checkbox"/> No one at home - repeated calls	
3 <input type="checkbox"/> Temporarily absent - Footnote	
4 <input type="checkbox"/> Other (Specify) 7	
TYPE B	
1 <input type="checkbox"/> Vacant - nonseasonal	} Fill items 1-6a, 7-10, 12c as applicable, 15-19
2 <input type="checkbox"/> Vacant - seasonal	
3 <input type="checkbox"/> Usual residence elsewhere	
4 <input type="checkbox"/> Armed Forces	
5 <input type="checkbox"/> Other (Specify) 7	
TYPE C	
1 <input type="checkbox"/> Unused line of listing sheet	} Fill items 1-6a, 6c if required, 9c if required, 16-19, and Inter-Comm.
2 <input type="checkbox"/> Demolished	
3 <input type="checkbox"/> Merged	
4 <input type="checkbox"/> Outside segment	
5 <input type="checkbox"/> Built after April 1, 1970	
6 <input type="checkbox"/> Other (Specify) 7	

- 1 Noninterviews are classified into three general groups. See Chapter 13 for an explanation of Type A reasons; and Part C, Topic (28) for an explanation of Type B and C reasons.
- 2 Item 18 is used to report any instance in which you are unable to obtain an interview at a unit or for part of a unit. For each noninterview, you must mark the appropriate reason. If you are unable to interview an unrelated person or group living in the household, be sure to enter the reason for noninterview in item 18 on the separate questionnaire.
- 3 If an interview has been obtained for one or more related members of a family unit but not for all eligible members, consider it a completed interview. Enter the person number of the noninterviewed person in the footnote space on the front of the questionnaire and give the noninterview reason, in full, for each such person. Do not make any entry in item 18.

(19)

Item 19, Record of Calls

(19)

19. Record of calls				
Month	Date	Beginning time	Ending time	Completed Mark (X)
1		a.m. p.m.	a.m. p.m.	
2		a.m. p.m.	a.m. p.m.	
3		a.m. p.m.	a.m. p.m.	
4		a.m. p.m.	a.m. p.m.	
5		a.m. p.m.	a.m. p.m.	
6		a.m. p.m.	a.m. p.m.	

1 Record all visits made to a household to complete the initial interview including visits made when you found no one home. An "initial interview" is one in which the questions on the basic questionnaire have been completed. Count as "visits," only actual attempts to contact the household, such as ringing the doorbell or knocking on the door. Do not include telephone calls for appointments or additional calls to complete questions for persons not at home at the time of the initial interview or for questions which were overlooked.

- a Enter the date and time of each visit on the line for the particular visit you are making. That is, enter the date and time of the first call on the first line, for the second call on the second line, etc.
- b For the date, use two digits for month and date entries. Circle a.m. or p.m. for the time, as appropriate. For example, 01/19, 9:20 a.m. or 01/20, 7:00 p.m., etc. The beginning time represents the time you knock on the door.
- c After you have completed the initial interview, enter the ending time in the space provided. The interval between the beginning and ending times gives the actual time in the household, including any in-household waiting time. Do not "round" the beginning and ending times to the nearest five minutes but use exact times (to the minute). Enter an "X" in the "Comp." (completed) column, indicating that the interview was completed even if there are items requiring callbacks outstanding. Do this before you leave the household.

19 Record of Calls (Continued)

19

- 1 A completed interview is one in which you have asked all questions on health and personal characteristics for most related members of a household. If a respondent has refused to answer a few of the questions, such as that on income, but has provided the rest of the information, consider the interview completed.
- 2 Complete item 19 for each separate family unit. Enter the date and time of each call made and the beginning and ending time of interview for unrelated person(s) on separate questionnaire(s). Enter this information on the separate questionnaire even though you may not have to return to the household at a different time to interview these persons.
 - a If an interview is obtained for a family unit, but not for an unrelated person, mark the completed column on the family's questionnaire. Leave this column blank on the questionnaire prepared for the unrelated person.
 - b For unrelated household members, mark "X" in item 19, to indicate a completed interview, on each questionnaire that was completed for each unrelated person or group that was interviewed.
- 3 For noninterviewed households, enter only the dates and times when calls were made. Leave the "Ending time" blank.
- 4 Illustration of How to Fill Item 19 - On this page and the following page are illustrations of how to fill item 19. In example 1, no one was at home on the first trip to the household. The housewife and 20-year-old son were interviewed for themselves and for other related household members on the second trip. A roomer could not be interviewed until the third trip.

Example 1

These entries were recorded on the first questionnaire for the related household members.

19. Record of calls				
Month	Date	Beginning time	Ending time	Completed Mark (X)
1	01-17	10:30 ^{a.m.} _{p.m.}	^{a.m.} _{p.m.}	
2	01-18	7:45 ^{a.m.} _{p.m.}	8:30 ^{a.m.} _{p.m.}	X
3		^{a.m.} _{p.m.}	^{a.m.} _{p.m.}	
4		^{a.m.} _{p.m.}	^{a.m.} _{p.m.}	
5		^{a.m.} _{p.m.}	^{a.m.} _{p.m.}	
6		^{a.m.} _{p.m.}	^{a.m.} _{p.m.}	

19 Record of Calls (Continued)

19

These dates and times were recorded on the second questionnaire that was filled for the roomer.

19. Record of calls				
Month	Date	Beginning time	Ending time	Completed Mark (X)
	01-18	6:30 ^{a.m.}	7:30 ^{a.m.}	
	01-19	8:10 ^{a.m.}	1:30 ^{a.m.}	X

In example 2, three unrelated persons share an apartment. Column 1 was interviewed on the first visit. Column 2 was out of town for three weeks and column 3 could not be interviewed until the next evening. These entries were recorded on three separate questionnaires.

Example 2

Column (1)

19. Record of calls				
Month	Date	Beginning time	Ending time	Completed Mark (X)
	01-24	6:30 ^{a.m.}	7:00 ^{a.m.}	X

Column (3)

19. Record of calls				
Month	Date	Beginning time	Ending time	Completed Mark (X)
	01-24	7:10 ^{a.m.}		
	01-25	7:12 ^{a.m.}	7:35 ^{a.m.}	X

Column (2)

19. Record of calls				
Month	Date	Beginning time	Ending time	Completed Mark (X)
	01-24	7:10 ^{a.m.}		

18. Noninterview reason	
TYPE A	
1 <input type="checkbox"/> Refusal - Describe in a footnote	} Fill items 1-6a, 7, 8, 10, 12a-c as applicable, 16-19
2 <input type="checkbox"/> No one at home - repeated calls	
3 <input type="checkbox"/> Temporarily absent - Footnote	
4 <input type="checkbox"/> Other (Specify) <u>✓</u>	
TYPE B	
1 <input type="checkbox"/> Vacant - nonseasonal	} Fill items 1-6a, 7-10, 12a-c as applicable, 16-19
2 <input type="checkbox"/> Vacant - seasonal	
3 <input type="checkbox"/> Usual residence elsewhere	
4 <input type="checkbox"/> Armed Forces	
5 <input type="checkbox"/> Other (Specify) <u>✓</u>	
TYPE C	
1 <input type="checkbox"/> Unused line of listing sheet	} Fill items 1-6a, 6c if required, 7c if marked, 16-19, Send Inter-Comm.
2 <input type="checkbox"/> Demolished	
3 <input type="checkbox"/> Merged	
4 <input type="checkbox"/> Outside segment	
5 <input type="checkbox"/> Built after April 1, 1970	
6 <input type="checkbox"/> Other (Specify) <u>✓</u>	

✓ out of town for 3 wks.
OK where

Items 20 and 21, Record of Callbacks

20. List column numbers of sample persons not interviewed during initial interview.

None

Col. No.	SS Res.	Eye Care Res.	Prof. Resp. for Eye Care
	Y N	Y N	
	Y N	Y N	
	Y N	Y N	

21. Record of additional contacts

Month	Date	Beginning time	Ending time	Col. Nos. completed	
				SS	EC
1		a.m. p.m.	a.m. p.m.		
2		a.m. p.m.	a.m. p.m.		
3		a.m. p.m.	a.m. p.m.		
4		a.m. p.m.	a.m. p.m.		

1 Item 20 - Item 20 is a check item to enable you to identify which person(s) require a callback. Information for the Eye Care Page must be obtained from the sample persons if they are 19 years old or over. Information for the Smoking Supplement must be obtained from sample persons if they are 17 years old or over. (See Chapters 9 and 15 for more detailed instructions.)

If all applicable sample persons were interviewed during the initial interview, mark the "None" box. Otherwise, enter the column number(s) of all sample persons for whom a callback must be made and circle "Y" or "N" as appropriate to indicate the reason for the callback. Also enter the column number of the preferred respondent for the Eye Care Page. See Chapter 9 for more detailed instructions for the Eye Care page respondent. Determine the best time for a telephone call and enter this in the footnote space of the Household page. If the household has no telephone or if a telephone call is not acceptable, arrange for a return visit if you will be in the area.

2 Item 21 - Use item 21 to record information concerning callbacks made to complete the Eye Care page and Smoking Supplement. Enter the date and beginning time each time you make contact with the household whether or not an interview is obtained. Do not include calls resulting in busy signals, wrong numbers, no one at home, etc. Also enter the column numbers of the sample person(s) in the proper spaces in the "Col. Nos. completed" column.

a. If return visits are made because a telephone call could not be made, complete item 21 and footnote "Personal."

20-21 Records of Callbacks (Continued)

20-21

b Illustration of How to Fill Items 20-21

- 1) In this example, column 4 was completed during the first telephone call, column 1 during the second.

20. List column numbers of sample persons not interviewed during initial interview.				
<input type="checkbox"/> None				
Col. No.	SS Req.	Eye Care Req.	Prof. Resp. for Eye Care	
1	⓪ N	⓪ N	1	
4	Y ⓪	⓪ N	1-2	
	Y N	Y N		

21. Record of additional contacts					
Month	Date	Beginning time	Ending time	Col. Nos. Completed	
				SS	EC
1	01-24	7:45 ^{a.m.}	7:47 ^{a.m.}		4
2	01-26	10:00 ^{a.m.}	10:05 ^{a.m.}	1	1
3		a.m.	a.m.		
4		a.m.	a.m.		

- 2) In this example, column 4 was interviewed on a return visit.

20. List column numbers of sample persons not interviewed during initial interview.				
<input type="checkbox"/> None				
Col. No.	SS Req.	Eye Care Req.	Prof. Resp. for Eye Care	
4	⓪ N	⓪ N	4	
	Y N	Y N		
	Y N	Y N		

21. Record of additional contacts					
Month	Date	Beginning time	Ending time	Col. Nos. Completed	
				SS	EC
1	01-19	4:32 ^{a.m.}	4:40 ^{a.m.}		4
2		a.m.	a.m.		
3		a.m.	a.m.		
4		a.m.	a.m.		

1/personal

CHAPTER 3. PROBE PAGES

Chapter 3 discusses each question on Probe pages 2-17, how to fill it, and the necessary information about it.

A Eligible Respondent for Questions 1 and 2

Ask questions 1 and 2 (name and relationship of all household members) of any "responsible" adult member of the household whether or not the person is related to the head of the household. "Responsible" means being mentally competent and physically able to think clearly about the questions being asked. "Adult" means a person 19 years old or older or any person who has been married. "Related" means related by blood, marriage, or adoption.

B Eligible Respondent for Remaining Part of Questionnaire

The "eligible" respondent may answer most of the remaining questions on the basic questionnaire for all related persons, both adults and children under 19 years of age. Apply the following rules to determine who may respond for these parts of the questionnaire. (There are special rules for sample persons on the Eye Care page and the Smoking Supplement. These will be discussed in Chapters 9 and 15.)

- 1 17 or 18 Years Olds - Single persons 17 or 18 years old may not respond for other family members but may respond for themselves. The reason for this restriction is that, while 17 and 18-year old persons should know about themselves, they are unlikely to have sufficient knowledge about the rest of the family to be able to furnish accurate information. Accept 17 or 18-year-old persons as self-respondents under the following circumstances:
 - a If there is no related person in the household who is 19 years old or over; for example, if the household consists of two unrelated 17 or 18-year-old boys living in a school dormitory room, they may respond for themselves.
 - b If they are present during the interview with an older related respondent, 17 or 18-year-old persons may respond entirely or partly for themselves.

c Exception to Adult Respondent Rule

- 1) If an unmarried couple is living together as husband and wife (determined by the relationship reported in question 2), regardless of age, interview them together on a single questionnaire. Each can respond for each other and for any of their children.
 - 2) Unmarried persons living with one or more of their children can respond for themselves and their children regardless of their own age, even if living with their parents. However, persons under 19 cannot respond for other household members.
- 2 Children - Information about a child is normally obtained from one of the parents or other related adult in the household. If an unrelated person is usually responsible for the child's care, that person may respond for the child.
- a When interviewing in a prep or boarding school where the occupants are under 17, arrange for a responsible, knowledgeable person to be present during the interview. During the interview, children may or may not respond for themselves, but in any case footnote the situation. For example, "Head master responded," or "Counselor present."
 - b If there is a foster child or ward living as part of a family, the household respondent should answer the questions about the child. Do not enter these children on a separate questionnaire, but treat them as related household members.
- 3 Adults Not Related - Adults not related to the head of the household (partners, roomers, or domestics) are to answer all questions after question 2, for themselves. If, however, such persons have related family members in the household, any responsible adult member of that family may answer the questions for that family group. If no eligible respondent for the unrelated person is at home at the time of the original interview, a return call must be made to interview the person.

C Exception to Eligible Respondent Rule

- 1 You may interview someone who is responsible for the care of a person that is not competent to answer the questions if there are no related members of the household who can answer for that person. The person who provides the care may or may not be a member of the household. For this type of case, explain the circumstances, for example, "incompetent and unable to respond for self, respondent takes care of her during the day."
- 2 A member of the Armed Forces who lives at home may be interviewed for the family, but no health information is obtained for him/her because the survey only covers the civilian population.

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D Return Call May Be Necessary

In some instances, it may be necessary to make return visits to the household in order to interview an "eligible respondent" as defined in paragraph B above. For example, if a respondent does not appear to be "responsible" because of extreme age, illness, etc., stop the interview and arrange to make a return call to interview an eligible respondent. If an otherwise eligible respondent can answer questions for him/herself, but does not know enough about other related adults in the household, finish the interview for this person but arrange to call back for the other household members.

1

Question 1, Household Membership

1

1a. What is the name of the head of this household? - Enter name in first column.				1a. First name	1
b. What are the names of all other persons who live here? - List all persons who live here.		Yes*	No		
c. I have listed (Read names.) Is there anyone else staying here now, such as friends, relatives, or roomers?		<input type="checkbox"/>	<input type="checkbox"/>		
d. Have I missed anyone who USUALLY lives here but is now away from home?		<input type="checkbox"/>	<input type="checkbox"/>		
e. Do any of the people in this household have a home anywhere else?		<input type="checkbox"/>	<input type="checkbox"/>	Last name	
f. Are any of the persons in this household now on full-time active duty with the Armed Forces of the United States?		Y	Call(s).....	(Delete)	N

1 Question 1a - Ask question 1a on page 2 and record the name in column 1.

Enter the first name in the space provided at the top and enter the last name in the space below that. Apply the following definitions:

- a Household - The entire group of persons who live in one housing unit or one OTHER unit. It may be several persons living together or one person living alone. It includes the household head and any relatives living in the unit. The household may also include roomers, servants, or other persons not related to the head.
- b Head of Household - The person who is regarded as the head by the members of the household. It may be the chief breadwinner of the family, the parent of the chief earner, the only adult member of the household, or a member of the Armed Forces living at home about whom we want no health information. In husband-wife households, list the husband first, even if the wife is considered the head.

2 Question 1b - Continue with question 1b and record the names in the appropriate columns. List all members of the household, including unrelated persons, on one questionnaire (or one set of questionnaires if there are more than six persons in a household).

- a If there are 7-12 members in a household, use a second questionnaire and change the column numbers to "7," "8," etc., as shown below. If there are more than 12 members in the household, use additional questionnaires in a similar manner. Enter the last name of the person you list in the first column on second and successive questionnaires even when it is the same as the name listed on the first questionnaire.

1a. First name 7	1a. First name 8
James	Kate
-----	-----
Last name	Last name
Jones	-

① Household Membership (Continued)

①

- b If the persons reported in response to question 1 represent a "typical family group," such as husband, wife, and unmarried children, a parent and child, two or more unmarried sisters, or some similar clear-cut arrangement, consider all the members as a single household.

If, in answer to questions 1b-1d, the respondent reports a married son and his family or relatives, such as a mother, uncle, or cousin, ask if they all live and eat together as one family.

If they all live and eat together, treat them as a single household and interview the entire group on one questionnaire.

If any of the persons reported in answer to question 1 say they live separately from the others, ask about the access to the quarters they occupy and their kitchen facilities. If the quarters have either direct access or complete kitchen facilities, consider them as separate living quarters. If these separate living quarters have not already been listed, apply the rules for EXTRA units, according to the instructions given in Part D, Chapter 12.

- c Prescribed Order of Listing Household - List them in the following order:

- 1) Head of household.
- 2) Wife of the head.
- 3) Unmarried children of the head, or of the wife, in order of their ages, beginning with the oldest.
- 4) Married sons and daughters (in order of age) and their families listed in this order: Husband, wife, children.
- 5) Other persons related to the head.
- 6) Roomers and other persons not related to the head.
- 7) If, among the persons not related to the head, there are married couples or persons otherwise related among themselves, list them in the order indicated for the families of married children (group 4).

① Household Membership (Continued)

①

- d How to Enter Names - Enter the names as you did for the head of the household. If there are two persons in the household with the same first and last names, they must be further identified by a middle initial or name or as Sr., Jr., etc. Do not assume members of the household have the same last name. However, for each member of the household with the same last name as the person in the preceding column, enter a long dash instead of repeating the last name.

①	②	③	④	⑤	⑥
John Jr.	Betty	Olive	Samuel	John, Sr.	Thomas
Doe	—	Poe	—	Doe	Roe
Head	Wife	Daughter	Grandson	Father	Roomer

- 3 Questions 1c-1e - Questions 1c and 1d serve as reminders about persons who may be overlooked by the respondent. List each person named by the respondent in answer to these questions provided he is a household member. Question 1e serves to delete possible nonhousehold members from the list. There is an asterisk above the "Yes" box for questions 1c-1e that refers to the instruction, "Apply household membership rules."

- a Household Membership - Generally, two categories of persons in a household are considered as members of the household.

- 1) Persons, whether present or temporarily absent, whose usual place of residence at the time of the interview is the household. Usual place of residence is the place where the person usually sleeps.
- 2) Persons staying in the household who have no usual place of residence elsewhere.

Further details are given in Sections 6-10 of this topic.

- b Always ask any additional questions needed in order to properly determine who are household members. Examples of such questions are as follows:

- 1) How many days a week does your husband spend in the city where he works?

① Household Membership (Continued) ①

- 2) Does your daughter live in the town where she goes to college or does she sleep here and go back and forth to classes?
- 3) Do your family and your son's family all live and eat together?
- 4) Does your cousin have direct access to her room?

If you are in doubt whether to include a person as a member of the household, consider him a member of the household and explain the circumstances in an INTER-COMM.

- 4 Question 1f - Ask the question at this point to avoid asking unnecessary questions about active members of the Armed Forces who are not included in this survey.
 - a Armed Forces - "Active duty in the Armed Forces" means full-time active duty in the U.S. Army, Navy, Air Force, Marine Corps, or Coast Guard, and any National Guard unit presently activated as part of the regular Armed Forces. Included in "active duty" is the six-month period a person may serve in connection with the provisions of the Reserve Forces Act of 1955.
 - b Do not count as members of the Armed Forces, persons working in civilian positions for the Armed Forces, persons serving in the Merchant Marines, persons in a National Guard unit not activated as part of the regular Armed Forces or civilians who train only part time as reservists.
 - c Armed Forces Reserve - Persons who are in any reserve component of the Armed Forces but who only attend weekly reserve meetings, summer camp or the like are to be counted as members of the household.
- 5 If there is a "Yes" response to any of questions 1c-1f, ask "Anyone else" until a "No" response is received, and mark the "No" box or circle "N".

① Household Membership (Continued)

①

5 Delete the Name if Not Household Member

a If a person whose name has been listed on the questionnaire is considered to have a usual place of residence elsewhere, is living in a separate unit or is not a household member for any other reason (following the rules in Section 8 of this topic), delete as follows:

- 1) "X" out the column for that person from question 1 through item C.
- 2) For Armed Forces members, determine and indicate either "Living at home" or "Not living at home," then delete the column.
- 3) For persons other than Armed Forces members, explain the reason for the deletion.

b In deleting a person column, do not change the person numbers of other members of a household. See illustration.

<p>1a. What is the name of the head of this household?</p> <p>b. What are the names of all other persons living in this household? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>c. I have listed (Read names). Is this correct? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>d. Have I missed anyone who usually lives here? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p> <p>e. Do any of the people in this household live elsewhere? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p> <p>1. Are any of the persons in this household on active duty with the Armed Forces? (Delete) <input checked="" type="checkbox"/></p> <p>2. How is — related to —</p> <p>3. What is —'s duty station? (Delete)</p> <p>Refer to Flashcard</p> <p>C 1. Record</p> <p>2. Record where it was reported.</p>	<p>1. First Name John ^①</p> <p>Last Name Jones</p> <p>2. Relationship living at home</p> <p>3. Name None</p> <p>Q. No. C</p>	<p>1. First Name Karen ^②</p> <p>Last Name —</p> <p>2. Relationship wife</p> <p>3. Name None</p> <p>Q. No. C</p>	<p>1. First Name Kathy ^③</p> <p>Last Name —</p> <p>2. Relationship daughter</p> <p>3. Name LIVES QUARTERS AT</p> <p>Q. No. C</p>
	<p>AGE</p> <p>RACE</p> <p>1 W</p> <p>2 B</p> <p>3 OT</p>	<p>AGE</p> <p>RACE</p> <p>1 W</p> <p>2 B</p> <p>3 OT</p>	<p>AGE</p> <p>RACE</p> <p>1 W</p> <p>2 B</p> <p>3 OT</p>
	<p>SEX</p> <p>1 M</p> <p>2 F</p>	<p>SEX</p> <p>1 M</p> <p>2 F</p>	<p>SEX</p> <p>1 M</p> <p>2 F</p>
	<p>BED DAYS</p> <p>None (NP)</p>	<p>BED DAYS</p> <p>None (NP)</p>	<p>BED DAYS</p> <p>None (NP)</p>

6 Usual Place of Residence Defined

In most cases, usual place of residence means the place the person would name in reply to the question, "Where do you live?" More specifically, it is the place where the person usually sleeps. A usual place of residence must be specific living quarters held for the person to which he is free to return at any time. A mailing address alone does not constitute a usual place of residence.

① Household Membership (Continued)

①

Living quarters which a person rents to or lends to someone else cannot be considered his/her usual place of residence during the time it is occupied by someone else. Likewise, vacant living quarters (sometimes furnished) which a person offers for rent or sale during his/her absence should not be considered his/her usual place of residence while he/she is away. If the living quarters are furnished, be sure the household is not just temporarily absent--see below.

Persons with no usual place of residence elsewhere include recent migrants, persons trying to find permanent living quarters and other persons who are staying temporarily in the unit and do not have a home of their own.

7 Household Members - Count the following persons as household members of the sample unit:

a Persons who consider the sample unit as their home and who are:

- 1) Living at home at the time of the interview; or
- 2) Temporarily absent at the time of the interview, on vacation, visiting or on business. This includes bus drivers, railroadmen, traveling salesmen, etc., who usually do not stay long in one place, but who return home at intervals.

b Persons who consider the sample unit as their home but who are in a general hospital, that is, a hospital where most patients remain for a short period of time only, regardless of how long their stay has been in the hospital.

c New-born babies who have not yet left the hospital, even if born after the reference period.

d Students of any age (including student nurses) who live in the sample unit while attending school. If they are at home on summer vacation at the time of the interview, consider them as household members of their own home.

e Crew members of a vessel who consider the sample unit as their home. This rule applies regardless of the length of their trips and regardless of whether they are at home or on the vessel at the time of your visit.

f Domestic or other employees who live with the household and sleep in the sample unit.

g Boarders or roomers who regularly sleep in the sample unit.

h Civilians who usually live in the sample unit but who are temporarily abroad on a vacation or in connection with their work.

i Persons temporarily visiting with the household but who have no usual place of residence elsewhere.

j Foster children, wards.

① Household Membership (Continued)

①

8 Nonhousehold Members - Do not count the following persons as household members of the sample unit:

- a Persons who were formerly members of the household but who at the time of interview:
 - 1) Are absent because they (regardless of age) are living elsewhere and attending school at the time of the interview. If they are home from school on summer vacation, count them at their home.
 - 2) Are inmates of correctional or penal institutions, mental institutions, homes for the aged or needy, rest homes or convalescent homes, homes or hospitals for the chronically ill or handicapped, regardless of how long they are expected to remain there.
 - 3) Are now living in nurses' homes, convents or monasteries, or other places in which residents may expect to reside for long periods of time.
 - 4) Are now working abroad if their regular place of duty is abroad.
 - 5) Are members of the Armed Forces on active duty. We do not include military personnel in this survey. For definition of Armed Forces, see Section 4, page D3-7.
- b Persons temporarily visiting with the household who have a usual place of residence elsewhere to which they are free to return to at any time.
- c Persons who take their meals with the household but usually lodge or sleep elsewhere.
- d Domestic employees or other persons employed by the household who do not sleep in the sample unit. If, however, they occupy quarters which have no cooking equipment but which are on the same property as the sample unit (main house), consider them as household members.

9 Special Classes of Persons

Persons with Two or More Homes - Some persons (or families) have two or more homes and they may spend part of the time in each. For such cases, you must first determine which unit should be considered the person's usual place of residence. This is the home that the person occupies most of the time. Note that this is not necessarily the person's legal or voting residence.

① Household Membership (Continued)

①

If you are unable to determine the person's usual place of residence because an equal amount of time is spent at each home, consider the sample unit as the usual place of residence if he/she is living there at the time of interview.

Persons Who Work Away from Home - Some persons sleep most of the week in one place to be near their work but may spend weekends or other nonwork periods in another place. Count such persons as members of the household in which they sleep most of the week.

Domestic Employees in Separate House or Cabin - If domestic employees sleep in a separate house or cabin, count them as a separate household if they have separate cooking equipment. If they do not have separate cooking equipment, count them as part of the main household.

Persons Who Have Just Moved Into the Housing Unit - Interview the household member living in the housing unit on the day of your interview regardless of when they moved into the unit. For example, suppose you make your first call to interview a household on Tuesday, and find no one at home. For some reason you are unavoidably prevented from calling back until Saturday, when you find that the family you would have interviewed on Tuesday has moved out and another family moved in on Thursday. Interview the household occupying the unit at the time of your interview, that is, Saturday.

Citizens of Foreign Countries - Citizens of foreign countries and other persons who are living on the premises of an embassy, ministry, legation, chancellory, or consulate are never to be interviewed. Consider any such place not to be included in any segment.

Citizens of foreign countries, who are not living on the premises of an embassy, etc., and have no usual place of residence elsewhere in the United States are to be considered residents of the sample unit and interviewed only under the following circumstances:

a They are permanently living in the United States.

or

b They are temporarily living in the United States and are going to school here, or are employed here, or are members of the family of a person going to school or employed here.

Consider those persons who are not included in either paragraphs a or b above as having a usual place of residence elsewhere.

Migratory Workers - Consider migrant farm or ranch workers and logging camp workers as household members of the sample unit IF they have no usual place of residence elsewhere in the United States.

① Household Membership (Continued)

①

- 10 Difficult Cases - If you cannot clearly determine from the instructions how to proceed in problem cases, call your office for assistance. Before calling, however, assemble all the information that you think would be useful to your office in advising you on how to proceed.

②

Question 2, Relationship

②

2 How is -- related to -- (Head of household)?	2 Relationship HEAD
--	------------------------

- 1 Question 2, Relationship - Enter the relationship of each person to the head of the household. If the respondent has previously given you this information, you may record the relationship without asking the question.
 - a. Head of Household - There must be one and only one head of the household. In some households you will find two or more unrelated persons sharing a housing unit. Since there can be only one head, designate one as the "Head" and call each of the others "Partner."
 - b. Armed Forced Members - If an Armed Forces member is living at home and is reported to be the household head, show the family relationships accordingly. If an Armed Forces member is not living at home, designate the wife or other family member as the household head. Do not obtain any information about active Armed Forces members except income.
 - c. If "Head" Deleted - If the person originally designated as the head of the household is deleted for any reason, designate another person as "Head" and change the relationship entries of the other household members if necessary. However, an Armed Forces member living at home would remain as "Head."
 - d. Couples Living Together - You must ask question 2 of persons of the opposite sex living in the same household, and accept the response given. If they consider themselves as married (legally or not), treat them in the same manner as any other husband-wife situation.
- 2 Example of Relationship Entries - Some typical examples of relationship entries are: Wife, son, daughter, stepson, stepdaughter, father, mother, grandson, daughter-in-law, aunt, cousin, nephew, roomer, hired hand, partner, and maid.
- 3 Persons Unrelated to the Head - If there are any persons in the household who are not related to the head but are related to each other, their relationship to each other should be shown also. For example, list a roomer and his wife as "roomer" and "roomer's wife;" list a maid and her daughter as "maid" and "maid's daughter."

② Relationship (Continued)

②

4. Persons in "Special Places," Rooming Houses, Etc. - In "special places" (institutions, hospitals, hotels for transients, facilities for housing students or workers, summer camps, trailer or tent camps) or rooming or boarding houses, follow the rules in paragraphs 2 and 3 above for relationship entries in question 2.

5. Separate Questionnaires for Nonrelated Persons - Complete a separate questionnaire for each listed unrelated person or family group in the household. After recording the names of all household members and completing questions 1 and 2 on the first questionnaire, transcribe the names and relationships of the unrelated household members to a separate questionnaire. Change the column number of each person to agree with the one on the first questionnaire. For example, a roomer is listed as Person 5. Transcribe the name and relationship to the first column of the second questionnaire and change the column number from 1 to 5.

On the cover page of the questionnaire for unrelated person(s), transcribe identification items 1 through 5 from the original questionnaire and ask question 6b, mailing address, of the unrelated persons. Often an unrelated household member may have a mailing address different from the household head. If the mailing address is the same as that entered in item 6a on the first questionnaire, mark the box "Same as 6a" in question 6b on this questionnaire. If the mailing address is different from that entered in item 6a, enter the mailing address in question 6b as reported by the respondent. Continue the interview for these persons in the prescribed manner after completing the interview for the basic family unit. Items 1-5 must be completed on the separate questionnaire even if you know, at this point, there will be no completed interview for the nonrelated person(s).

3

Question 3, Date of Birth, Age, Race, and Sex

3

1. What is --'s date of birth? (Enter date and Age, and circle Race and Sex)				AGE		
				RACE		
				1 W		
				2 B		
				3 OT		
				SEX		
				1 M		
				2 F		
				2. Month	Date	Year

Ask question 3 for each person, enter date of birth and Age, and circle Race and Sex.

- 1 Age - Obtain the exact date of birth and enter it in the appropriate space; enter all four digits of the year. If you cannot get the exact date, enter the approximate date, or if you can get only the year, enter DK/DK/1919. From the date of birth, determine the age of the person on his/her last birthday using the Age Verification Chart (Card A). Verify the age with the respondent and then enter it in the "Age" box. For babies under one year of age, enter "Und. 1" in the answer space.

If the person refuses to give an age or birth date make the best estimate you can and indicate that the age is estimated, for example, "30 est." The following examples represent entries that would not be acceptable age estimates: "Over 25 years," "17+ years," etc. These examples are unacceptable because they are too general and do not indicate whether the person is a young adult, middle-aged, or an elderly person.

- 2 Race - Three codes are used for race: "W" for White, "B" for Black, and "OT" for Other. The race of the respondent can usually be marked by observation. Assume the race of all related persons is the same as that of the respondent unless you learn otherwise. Circle the proper letter when you are recording the person's race. If you cannot fill this item by observation, ask: "What is --'s race?" Use the following codes:

White: Includes Latin-Americans unless they are definitely Black, Indian, or other nonwhite.

Black: Black or Negro.

Other: Race other than White or Black, including Japanese, Chinese, American Indian, Korean, Eskimo, and Hindu.

Code the race of the mother for persons of racial mixtures. Code the race of the child if different from the adopting parents.

③ Date of Birth, Age, Race, and Sex (Continued)

③

- 3 Sex - Circle the appropriate sex for each person after you have circled the race. The sex of a person can usually be determined from the name or relationship entries. However, names such as Marion and Lynn are used for both males and females. If there is any doubt, ask about the person's sex.

① Item L, Selecting the Condition List and Sample Person

①

L	Ask Condition list _____.	Use Flashcard _____ to determine Sample persons; mark SP boxes.
---	---------------------------	---

- 1 There will be an entry of 1, 2, 3, 4, 5, or 6 after "Ask Condition list _____" in item L to indicate the correct condition list, question 32, to ask.
- a EXTRA Units - For EXTRA units, use the same list used for the original sample unit. Enter the condition list number (1-6) in item L of the questionnaire for the EXTRA unit.
- b Added Units with No Preassigned Serial Numbers - If you add units to the listing sheet, find the condition list number assigned on the questionnaire with the highest serial number. Starting with the next number, assign numbers in sequence to each questionnaire for which serial numbers were not preassigned. For example, if "5" were entered on the questionnaire with the highest serial number, your entries in item L for subsequent questionnaires would be "6", then "1", then "2". Do not confuse this instruction with EXTRA units above.
- c Unrelated persons - For unrelated persons, enter the same condition list number in item L that was entered on the original questionnaire.

2 There will be an entry (J, K, or L) after the word "Flashcard" to indicate the correct flashcard to use when determining the sample person(s).

- a Determining the Sample Persons - The sampling pattern for determining the sample person is based on the total number of household members (related and unrelated) including any deleted persons. On the flashcard, the entries in the first column indicate the number of household members. The numbers in the second column specify the corresponding column numbers of sample persons on the HIS-1.

For example, if "J" was entered on the HIS-1, and there were five persons in the household, the persons in columns 1 and 4 would be the sample persons for this household. Mark the "SP" box at the top of the column(s) of selected sample persons. If there are more than 15 persons in the household, call the Regional Office for instructions.

- b EXTRA Units - For EXTRA units, use the same flashcard used for the original sample unit. Enter the flashcard letter (J, K, or L) on the questionnaire for the EXTRA unit.
- c Added Units with No Preassigned Serial Numbers - If you add units to the listing sheet, find the flashcard letter assigned on the questionnaire with the highest serial number. Starting with the next flashcard letter, assign letters in sequence to each questionnaire for which serial numbers were not preassigned. For example, if "L" were entered on the questionnaire with the highest serial number, your entries would be "J," then "K," then "L." Do not confuse this instruction with EXTRA units above.
- d Persons Deleted from the Questionnaire - If a person is deleted from the questionnaire (an X is drawn through the column), do not substitute in any way. Include the deleted person in your total count of household members (in column 1 of the flashcard), and enter an X in the "SP" box, if this person was selected as a sample person. However, do not obtain information for a sample person who is deleted from the questionnaire.

Ⓒ

Item C and Reference Dates

Ⓒ

<p>C</p> <p>1. Record the number of Bed Days, Doctor Visits, and Hospitalizations</p> <hr/> <p>2. Record each condition in the person's column, with the question number(s) where it was reported.</p> <p>Reference dates</p> <p>2-week period _____</p> <p>12-month Bed Days and Doctor visit probe _____</p> <p>Hospital probe _____</p>	<p>C</p> <table border="1" style="width: 100%;"> <tr> <th style="width: 33%;">BED DAYS</th> <th style="width: 33%;">DV</th> <th style="width: 33%;">HOSP</th> </tr> <tr> <td style="text-align: center;">None (NP)</td> <td style="text-align: center;">None (NP)</td> <td style="text-align: center;">None (NP)</td> </tr> <tr> <td style="text-align: center;">_____ (NP)</td> <td style="text-align: center;">_____ (NP)</td> <td style="text-align: center;">_____ (NP)</td> </tr> </table> <table border="1" style="width: 100%; margin-top: 5px;"> <thead> <tr> <th style="width: 15%;">C. No.</th> <th style="width: 85%;">Condition</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	BED DAYS	DV	HOSP	None (NP)	None (NP)	None (NP)	_____ (NP)	_____ (NP)	_____ (NP)	C. No.	Condition																		
	BED DAYS	DV	HOSP																											
None (NP)	None (NP)	None (NP)																												
_____ (NP)	_____ (NP)	_____ (NP)																												
C. No.	Condition																													

1 Item C - Item C is placed in this position on the questionnaire for ready reference when filling succeeding pages.

a Item C1 indicates for each person:

- 1) The number of two-week bed days reported.
- 2) The number of two-week doctor visits reported.
- 3) The number of hospitalizations reported.

If no bed days, doctor visits or hospitalizations are reported for a person, indicate this in C1 by marking the "None" box in that person's column.

b Item C2 is provided for recording all conditions requiring Condition pages along with identification of the items in which these conditions were reported.

- 1) Conditions to be Entered in Item C2 - Enter in item C2 any conditions reported in answer to those probe questions that are specifically designed to pick up conditions during the course of the interview prior to the Condition page. These will be health problems or accidents resulting in two-week restricted activity (questions 10, 11); a doctor visit during the past two weeks (questions 11, 17); limitation of activity (question 28); or conditions listed in or reported while asking the condition list (question 32, if present during the specified reference period).

③ Item C and Reference Dates (Continued)

③

- a) A "Volunteered" condition is one given in response to probe questions not specifically designed to pick up conditions, pages 2-17, excluding the condition lists, and must be present during the past two weeks. For example, if the response to probe question 18 is "I haven't seen a doctor since I went to him for my arthritis," ask: "Was your arthritis present during the past two weeks?" If so, enter "18-arthritis" in C2.
- b) Also enter in C2 certain conditions reported while completing the Condition page as described in Chapter 4. Chapters 5 and 6 contain instructions for entering conditions in C2 from the Doctor Visits and Hospital pages.
- c) If the respondent refuses to give the name of the condition, enter "Refused" in C2 with the source.

Do not enter in C2 any condition reported after the Hospital page. Footnote these conditions and where they were reported; if the household is reinterviewed and these conditions are reported at that time, the reinterviewer will be able to reconcile the differences.

- 2) Source of Condition - If a condition is reported during the asking of the probe questions, record the number of the probe question in item C2 at the time the condition is reported. If a condition is reported in some other part of the interview, record instead the type of page, abbreviating as follows:

Condition page - Cond.
Doctor Visits page - DV
Hospital page - Hosp.

- 3) Double Reporting of Conditions - If a condition reported in answer to a probe question is recorded in item C2 for a particular person and is reported again in answer to another question, do not record this condition again on another line of item C2. Instead, record the question number in which the condition was reported again. This entry should be made in an unfilled question number column in item C2 by the original question number entry. Do not enter the page type (Cond., DV, Hosp.) in item C for conditions previously reported. Entries of this kind should be made in item C only when conditions are first reported on these pages. See the following illustration:

Ⓒ Item C and Reference Dates (Continued)

Ⓒ

C	1. Record the number of Bed Days, Doctor Visits, and Hospitalizations	BED DAYS	DV	HOSP.
		<input checked="" type="checkbox"/> None (NP)	<input checked="" type="checkbox"/> None (NP)	<input type="checkbox"/> None (NP)
		(NP)	(NP)	(NP)
	2. Record each condition in the person's column, with the question number(s) where it was reported.	Q. No. Condition		
	Reference dates	2810 cal brack		
	1-week period <u>Jan 15 Jan 28</u>	Hap Arm Delv		
	12-month Bed Days and Doctor visit probe <u>Jan 28</u>			
	Hospital probe <u>Dec 1</u>			

- 2 Reference Dates - "Reference dates" on page 2 under the instructions for item C2, will be filled in advance by the Regional Office.
- a If additional questionnaires are needed for unrelated household members or for EXTRA units, transcribe the correct reference dates to this space.
 - b If an entire interview is delayed until the week following interview week, it will be necessary to update the reference period. Prepare a new calendar card showing the new reference period, that is, the two-week period ending the Sunday night immediately prior to your actual interview date. Also, correct the "Reference dates" entered in C2 to reflect the new reference period.
 - c Two-Week Reference Period - The "past two weeks" refers to the two weeks (14 days) just prior to the week in which the interview is conducted. The two-week period starts with Monday and ends with (and includes) last Sunday night. Do not include any days of the interview week. For example, if the interview is conducted on Tuesday, January 16, 1979, "the past two weeks" would refer to the period beginning on Monday, January 1, 1979 through Sunday night, January 14, 1979.
 - d 12-Month Bed Days, Doctor Visit Probe - This date is "last Sunday's" date a year ago, and is the closing date of the two-week reference period. For example, if you interview Wednesday, January 17, 1979, the reference date would be January 14, 1978.
 - e Hospital Probe - This date is 13 or 14 months before interview week, to pick up hospitalizations which started before the 12-month reference period but which may have extended into it. It is the first of the month which preceded the month in which Monday of interview week falls. For example, if you're interviewing Thursday, February 1, 1979, the Monday of interview week was in January; therefore, the hospital probe reference date is December 1, 1978.

4

Question 4, Marital Status

4

<p>If 17 or over.</p> <p>4 Is -- now married, widowed, divorced, separated, or never married?</p>	<p>0 Under 17</p> <p>1 <input type="checkbox"/> Married - spouse present</p> <p>2 <input type="checkbox"/> Married - spouse absent</p> <p>3 <input type="checkbox"/> Widowed</p> <p>4 <input type="checkbox"/> Divorced</p> <p>5 <input type="checkbox"/> Separated</p> <p>6 <input type="checkbox"/> Never married</p>
---	---

1 For persons 17 and over, if it is obvious from the relationship entries that two of the household members are husband and wife, mark one of the "Married" boxes without asking the question.

a Mark "Married-spouse present" for each married household member whose spouse is also listed on the questionnaire. This includes Armed Forces members living at home as well as those whose spouses are temporarily absent.

b Mark "Married-spouse absent" for a married person who is not legally separated, and whose husband or wife is not a member of the same household. This includes Armed Forces members who are not living at home.

2 Never Married - Includes persons whose only marriage has been annulled and people living together who make no mention of a common-law marriage.

3 Separated Persons - Accept a respondent's statement that a person is separated. If, however, the respondent raises a question as to the meaning of "separated," explain that the term refers only to married persons who have a legal separation or who have parted because of marital discord.

Classify persons who are separated from their spouse because of the circumstances of their employment, service in the Armed Forces or similar reasons as married-spouse absent, not separated.

4 Common-Law Marriages - Consider persons with common-law marriages as "married", without asking the question.

(H)

Item H, At Home

(H)

H	<small>If related persons 17 years old or over are listed in addition to the respondent, say</small>	H	<input type="checkbox"/> Under 17
	<small>We would like to have all adults who are at home take part in the interview.</small>		<input type="checkbox"/> At home
	<small>Is your --, your --, etc., at home now? If "yes" etc. Please ask them to join us.</small>		<input type="checkbox"/> Not at home

After completing questions 1-4, mark one box in item H for each person. Note the instruction that if related persons 17 years old or over are listed in addition to the respondent, say: "We would like to have all adults who are at home take part in the interview. Is your --, your --, etc., at home now?"

- 1 If other eligible respondents are at home, say: "Please ask them to join us." This procedure is a reminder to interview all ADULTS personally for the ensuing health questions if they are available at the time of the interview. Since the remaining questions are about the person's own health, they should be the best source of information about them.
- 2 If "Not at home" is marked for persons who arrive later on in the interview, interview them also, but do not change the original entry. This rule applies even for persons who arrive in time to answer some of questions 5-34.
- 3 In the case of unrelated persons (partners, roomers, etc.), this "at home" determination is not made until after completing the interview for all related members. Record "At home" for an unrelated person at the time you conduct the interview with that person. Persons unrelated to the head of the household who are related to each other are treated the same as any other family group.

5 - 9

Questions 5 through 9, Two-Week Activity Limitation

5 - 9

<p>This survey is being conducted to collect information on the Nation's health. I will ask about visits to doctors and dentists, illness in the family, and other health related items. (Hand calendar) The next few questions refer to the past 2 weeks, the 2 weeks outlined in red on that calendar, beginning Monday, _____ (date), and ending this past Sunday, _____ (date).</p>		<p>Y (56) 00 N } Age: 17- (6) 6-16 (7) Under 6 (8)</p>			
<p>5a. During these 2 weeks, did -- stay in bed because of any illness or injury?</p>	<p>5a. 00 N</p>	<p>Days</p>			
<p>b. During that 2-week period, how many days did -- stay in bed all or most of the day?</p>	<p>b. _____ Days</p>				
<p>6. During these 2 weeks, how many days did illness or injury keep -- from work? (For females): not counting work around the house?</p>	<p>6. _____ Wk. days (8) 00 <input type="checkbox"/> None (8)</p>				
<p>7. During these 2 weeks, how many days did illness or injury keep -- from school?</p>	<p>7. _____ Sch. days 00 <input type="checkbox"/> None (8)</p>				
<p>If one or more days in 5a, ask 8. otherwise go to 9</p> <p>8. On how many of these -- days lost from <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="padding: 2px;">work</td></tr><tr><td style="padding: 2px;">school</td></tr></table> did -- stay in bed all or most of the day?</p>	work	school	<p>8. _____ Days 00 <input type="checkbox"/> None</p>		
work					
school					
<p>9a. DO NOT COUNTING the day(s) <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="padding: 2px;">in bed</td></tr><tr><td style="padding: 2px;">lost from work</td></tr><tr><td style="padding: 2px;">lost from school</td></tr></table></p> <p>Were there any (other) days during the past 2 weeks that -- cut down on the things he usually does because of illness or injury?</p>	in bed	lost from work	lost from school	<p>9a. 1 Y 2 N (10)</p>	
in bed					
lost from work					
lost from school					
<p>b. (Again, not counting the day(s) <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="padding: 2px;">in bed</td></tr><tr><td style="padding: 2px;">lost from work</td></tr><tr><td style="padding: 2px;">lost from school</td></tr></table>)</p> <p>During that period, how many (other) days did he cut down for as much as a day?</p>	in bed	lost from work	lost from school	<p>b. _____ Days 00 <input type="checkbox"/> None</p>	
in bed					
lost from work					
lost from school					

- 1 Read the introduction above question 5a to the respondent once to convey the purpose of the survey and some of the topics to be covered during the interview. This introduction also is designed to introduce the reference period for probe questions 5-12 and 14-17. Do this by giving the respondent the calendar card with the appropriate two-week reference period marked in red and then indicate orally the beginning and ending dates of the two-week reference period as entered in "2-week period" of item C2. Ask all appropriate questions, 5-10, as a block for each individual, starting with the first person listed. Repeat the procedure for the next related household member and so on.
- 2 Ask questions 5-9 to obtain the number of days, if any, that each person in the household remained in bed, lost time from work or school, or cut down on usual activities because of illness or injury during the two weeks preceding the interview.
- 3 Question 5, Bed Disability Past Two Weeks - Ask question 5 to determine if the person you are asking about spent any days in bed during the past two weeks because of illness or injury.

⑤-⑨ Two-Week Activity Limitation (Continued)

⑤-⑨

- a Day in Bed - Any day on which the person was kept in bed either all or most of the day because of illness or injury. All or most of the day is defined as more than half of the daylight hours (or of the hours that the person is usually awake, if he works a night shift). Taking a nap on "general principles" should not be counted as a day in bed. Also, count all days as a patient in a hospital, sanitarium, or nursing home as bed days whether or not the patient was actually lying in bed at the hospital, sanitarium or nursing home. Exclude hospital days for a normal newborn, unless the baby had some complication or illness.
- b Bed - Anything used for sleeping, including sofa, cot or mattress. Being on the sofa watching TV because a person was too ill to get around would be counted as "in bed." The important distinction here is whether the person was ill enough to be required to be in bed for all or most of the day.
- 4 Question 6, Days Lost from Work - Ask this question for each individual in the 17+ age group to determine if the person you are asking about lost time from work during those two weeks because of illness or injury. Use the alternate version of the question for females.
- a Work - Paid work as an employee for someone else for wages, salary, commission or pay "in kind" (meals, living quarters, or supplies provided in place of cash wages). Also, include work in the person's own business, professional practice or farm, and work without pay in a business or farm run by a related household member.
- Exclude work around the house, volunteer unpaid work, such as for church, Red Cross, or charity, and service in the Armed Forces.
- b Work Loss Day - Any scheduled work day when more than half of the day was lost due to an illness or injury. If the person works only part of a day and loses more than half of that time, count it as a day lost.
- c Disregard School Days - If a person 17 years of age or over goes to school instead of, or in addition to, working, record only the days lost from work (disregarding any days lost from school). Include any days lost from school for persons 17 and over in cutdown days, question 9.
- 5 Question 7, Days Lost from School - Ask this question if the person is aged 6-16 to determine if any days were lost from school during the past two weeks because of illness or injury.

- a School Loss Day - Any scheduled school day when more than half of the day was lost due to an illness or injury. If a person goes to school only part of a day and loses more than half of that time, count it as a day lost.
- b School Vacation - Since school vacation periods are not all the same, ask this question even during periods of the year which might normally be considered school vacation periods.
- c Disregard Work Days - If a person 6 through 16 years of age works instead of, or in addition to, going to school, record only the days lost from school (disregarding any days lost from work). Include any days lost from work for persons 6 through 16 years of age in cutdown days, question 9.
- 6 Check for Number of Days Reported in Questions 6 and 7 - Since very few people work seven days a week or go to school seven days a week, follow up such replies as "The whole two weeks" or "All last week," etc. Do not enter "14" or "7" automatically. Reask the question in order to find out the actual number of days lost from work or school. If a person actually lost 14 days from work or school during "the past two weeks," enter "14" but explain in a footnote that these days were actually lost.
- 7 Question 8, Number of Work-Loss or School-Loss Days in Bed - Ask question 8 only if the respondent reports bed days in question 5b and either work-loss days in question 6 or school-loss days in question 7. If "N" is circled in 5a, skip to question 9.
- a The purpose of question 8 is to determine if any of the bed days and days lost from work or school were the same days. The entry in question 8 can be equal to but not greater than the number of bed days reported in question 5b, or the work/school-loss days reported in question 6 or 7.
- b In asking question 8, insert the number of work-loss days or school-loss days recorded in 6 or 7 for the first set of dashes. Select the words within the brackets that fit the situation. For example, if the person lost two days from work, ask question 8 as follows: "On how many of these two days lost from work did you stay in bed all or most of the day?" If one school day was lost, ask "On that day John lost from school, did he stay in bed all or most of the day?"
- 8 Question 9a, Restricted Activity Past Two Weeks - Ask question 9a for each person, unless 14 bed days were reported for the person. In this case, circle "N" without asking the question. Question 9a has three purposes:
- To find out if persons under 17 years had work-loss days or persons 17 or over had school-loss days. Do not record these in question 6 or 7.

⑤ - ⑨ Two-Week Activity Limitation (Continued)

⑤ - ⑨

To find out if, in addition to any bed days or work or school-loss days reported earlier, the person cut down on usual activities on any other days during the two-week reference period.

To find out if the person had any cut-down (restricted activity) days during the two-week period even though no bed days, school-loss or work-loss days were reported in questions 5-7. Include in question 9 any school-loss days reported for a child under 6.

- a Things He Usually Does - The things a person usually does are the person's "usual activities." For school children and most adults, "usual activities" would be going to school, working, keeping house, etc. For children under school age, "usual activities" depend upon whatever the usual pattern is for the child which will, in turn, be affected by the age of the child, weather conditions, etc. For retired or elderly persons, "usual activities" might consist of almost no activity, but cutting down on even a small amount would mean that a person should answer "Yes" to the question.

"Usual activities" on Sundays or holidays are the things the person usually does on such days, such as going to church, playing golf, visiting friends or relatives, staying at home and listening to the radio, reading, looking at television, etc.

- 1) The following examples illustrate cases of persons cutting down on the things they usually do because of illness or injury: a person in school was kept away from school a person who worked away from home was kept away from work; a farmer or a housewife was kept from caring for the farm or the home either completely or had to cut out all but the essential chores; an elderly person who normally takes a daily walk in the park was kept from doing so.
- 2) In borderline cases, where "usual activity" is difficult to determine, accept what the respondent considers to be the person's "usual activities." For example, a man with a heart condition may still consider his "usual activity" to be "working" even though the heart condition has prevented him from working for a year or more. Accept his statement that "working" is his "usual activity." In another example, a man may say that a heart attack six months ago forced him to retire from his job or business; he does not expect to return to work, and considers his present "usual activities" to include only those associated with his retirement. The question, then, would refer to those activities.

b How to Ask - In asking question 9a, use the appropriate words within the brackets if days in bed or work-loss or school-loss days were reported earlier. Otherwise, omit the parenthetical phrase. Therefore, if no bed days or school or work-loss days were reported in questions 5-7, ask 9a as follows: "Were there any days during the past two weeks that John cut down on the things he usually does because of illness or injury?" If a person had previously reported two work-loss days and one day in bed, ask the question as follows: "NOT COUNTING the day in bed and days lost from work, were there any other days during the past two weeks that you cut down on the things you usually do because of illness or injury?"

9 Question 9b, Number of Cut-Down Days - The procedure is the same as that outlined for question 9a. The parenthetical phrases in 9b are used only if bed, work-loss, or school-loss days were reported previously.

a Cut Down as Much as a Day - A day of restricted activity (cut down) is a day when a person cuts down on usual activities for the whole of that day on account of an illness or injury.

- 1) Restricted activity does not imply complete inactivity but it does imply the minimum of the things a person usually does. A special nap for an hour after lunch does not constitute cutting down on usual activities for as much as a day, nor does the elimination of a heavy chore, such as cleaning ashes out of the furnace or hanging out the wash. All or most of a person's usual activities for the day must have been restricted for the person to have a cut-down day.
- 2) The following are some examples of a person having to cut down on the things he usually does for as much as a day:

A housewife who expected to clean house after doing the breakfast dishes, then work in the garden and go shopping in the afternoon was forced to rest because of a severe headache, doing nothing after the breakfast dishes until she prepared the evening meal.

A young boy who usually played outside most of the day was confined to the house because of a severe cold.

A garage owner whose usual activities included mechanical and other heavy work was forced to stay in his office directing others, talking to customers, etc., because of his heart condition.

b The reference period for question 9 includes Saturdays and Sundays. ALL the days of the week are of equal importance in this question, even though the types of activities which were cut down might not be the same on weekends as on regular weekdays. If necessary, mention this to the respondent. To illustrate this concept, consider the following example:

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⑤-⑨ Two-Week Activity Limitation (Continued)

⑤-⑨

A man who planned a fishing trip for Saturday and Sunday had to stay home from work Friday and was also too ill to go fishing both on Saturday and Sunday because of a flare-up of his back trouble. Assuming that this is the only time during the past two weeks in which he was bothered by back trouble, the correct entry for question 9b would be "2." The one work-loss day should have been reported in 6.

Question 10, Condition Causing Two-Week Limitation

If one or more days in 5-9, ask 10 otherwise go to next person.		
10a. What condition caused -- to	{ stay in bed miss work miss school cut down }	during the past 2 weeks?
		10a. Enter condition in item C Ask 10b
b. Did any other condition cause him to	{ stay in bed miss work miss school cut down }	during that period?
		b. Y N (NP)
c. What condition?		c. Enter condition in item C (10b)
Fill item C, (BED DAYS): from 5b for all persons.		

- 1 Ask parts a, b, and c of question 10 about each person for whom at least one day was reported in answer to questions 5-9.
- 2 In questions 10a and b, select the phrase or phrases from within the brackets according to the answers you have recorded in questions 5-9 for that person.
 - a If, for example, a person had two bed days in question 5b, one work-loss day in question 6, and three cut-down days in question 9b, ask question 10a as follows: "What condition caused you to stay in bed, miss work, or cut down during the past two weeks?" Then enter the condition(s) in item C2 and ask question 10b, "Did any other condition cause you to stay in bed, miss work, or cut down during that period?"

When multiple phrases are used, be sure to say "or" when asking the question since a person may stay in bed or miss work for different conditions. "And" implies you are referring to the same condition.

- b If only cut-down days are recorded (question 9b), ask question 10a using only the phrase "cut down," and continue in the manner described above, referring only to "cut down" when asking question 10b. For example, "What condition caused you to cut down during the past two weeks?"

NOTE: If an operation or surgery is reported as the reason for the restricted activity, probe to determine the condition causing the operation and enter that in C2, regardless of whether the person still has the condition.

3 Complications of Pregnancy, Delivery, and Birth

- a If pregnancy is reported as the reason for restricted activity during the past two weeks, probe for the specific complication (morning sickness, swollen ankles, etc.) and record it with "Preg." in item C2. If you cannot obtain a specific complication, enter "Pregnancy" in item C2.
- b If delivery is reported for the mother as the reason for restricted activity (including any routine hospital days) during the past two weeks, probe for the specific complication (infected breast, hemorrhage, etc.) and record it with "Del." in item C2. If you cannot obtain a specific complication, enter "Normal delivery" in item C2.

10

Condition Causing Two-Week Activity Limitation (Continued)

10

c Do not record birth during the past two weeks for the baby unless there were birth complications for the baby or the baby had some other illness. For such cases, enter the specific condition; do not enter just "birth" in item C2.

4 Menstruation and Menopause

a Record in item C2, any complication of menstruation causing restricted activity during the past two weeks. For example, excessive or slight "flow" or delayed or painful menstruation. If there were no complications but there was restricted activity, record "Menstruation."

b Record in item C2, any menopause symptoms causing restricted activity during the past two weeks. If there were no symptoms but there was restricted activity, record "Menopause."

5 Illness Resulting from Vaccination or Immunization - Vaccination and immunization in themselves are not illnesses. However, they may cause temporary illness with such symptoms as fever, headaches, etc. Record in item C2 the symptom which resulted from vaccination or immunization if restricted activity days are reported in the past two weeks.

6 After completing question 9 or 10 for all persons, review the entries in question 5b for each person and enter the number of bed days reported in the "BED DAYS" box in C1 in each person's column.

The following illustration gives an example of how to record the bed days reported in question 5b in item C1.

C	1. Record the number of Bed Days, Doctor V.								
	BED DAYS	DV	HOSP.	BED DAYS	DV	HOSP.	BED DAYS	DV	HOSP.
	<input checked="" type="checkbox"/> None (NP)	<input type="checkbox"/> None (NP)	<input type="checkbox"/> None (NP)	<input checked="" type="checkbox"/> None (NP)	<input type="checkbox"/> None (NP)	<input type="checkbox"/> None (NP)	<input type="checkbox"/> None (NP)	<input type="checkbox"/> None (NP)	<input type="checkbox"/> None (NP)
	(NP)	(NP)	(NP)	(NP)	(NP)	(NP)	5 (NP)	(NP)	(NP)

<p>This survey is being conducted to doctors and dentists, illness in the next few questions refer to beginning Monday. (Gate.)</p> <p>5a. During these 2 weeks, did ---</p> <p>5b. During that 2-week period, he</p>	<p>Y (5b)</p> <p>oo M</p> <p>Days</p>	<p>Y (5b)</p> <p>oo M</p> <p>Days</p>	<p>Y (5b)</p> <p>oo M</p> <p>Days</p>
	<p>If age: 17- (8) 6-16 (7) Under 6 (9)</p>	<p>If age: 17- (8) 6-16 (7) Under 6 (9)</p>	<p>If age: 17- (8) 6-16 (7) Under 6 (9)</p>

11

Question 11, Two-Week Accidents or Injuries

11

11a. During the past 2 weeks, did anyone in the family, that is you, your --, etc., have any (other) accidents or injuries?	Y	N (12)	
b. Who was this? - Mark "Accident or injury" box in person's column.			11b. <input type="checkbox"/> Accident or injury
c. What was the injury?			11c. Injury
d. Did anyone have any other accidents or injuries during that period?	Y (Reask 11b and c)	N	
If "Accident or injury," ask:			Y (Enter injury in Item C)
e. As a result of the accident, did -- see a doctor or did he cut down on the things he usually does?			N

1 Question 11a - This is the first time we ask a "family" question, that is, the question is asked once and covers all family members in the household. Insert the names or relationships of all family members when asking the question. If any accident or injury condition has been previously reported, insert the parenthetical "other." For example, "During the past two weeks, did anyone in the family, that is, you, your husband, or your son have any other accidents or injuries?"

a Accidents and Injuries - The terms "accident" and "injury" may be used interchangeably. There are cases, however, when an injury may occur when an accident is not involved, for example, a war injury, a shooting, a stabbing, etc.

b Injury - Cuts, bruises, burns, sprains, fractures, etc. "Insect stings," "animal bites," "heat or sun strokes," "blister," "frostbite," "frozen feet," and "poisoning" are also considered as injuries.

c Poisoning - Illnesses resulting from swallowing, drinking, breathing or coming in contact with some poisonous substance or gas. Poisoning may also occur from an overdose of a substance that is nonpoisonous when taken in normal doses. Exclude conditions which are diseases or illnesses, such as "poison oak," "poison ivy," "ptomaine or food poisoning."

2 Questions 11b-11d - Ask these questions as appropriate. If the respondent reports an injury, record the injury (cut hand, bruised leg, etc.) in the answer space for 11c. If there was an accident but no injury, enter the word "Accident" in the answer space for 11c. An example of this might be a person in a car accident who received no injury.

3 Question 11e, See a Doctor or Cut Down - If the response to 11e is "Yes," circle "Y" in that person's column and enter the question 11c entry in item C2. If a person had more than one accident or injury during the past two weeks, each one which resulted in a doctor visit or cut down activity must be entered separately in item C2 and a separate Condition page filled for each. However, if a single accident resulted in multiple injuries, enter these on a single line of item C2.

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⑪ Two-Week Accidents or Injuries (Continued)

⑪

" Doctor Visit - Contact between a person and a doctor for the purpose of obtaining medical advice, treatment, or examination. Include telephone calls to or from a doctor, visits to a doctor's office, a clinic, a medical center, or the outpatient department of a hospital where a person goes for treatment or examination but may not actually see or talk to a doctor. If you learn that a person saw a dentist for this accident or injury, consider this as "Yes."

12

Question 12, Two-Week Dental Visits

12

12a. During the past 2 weeks, did anyone in the family go to the dentist?	Y	N (13)	
b. Who was this? - Mark "Dental visit" box in person's column.			12b. <input type="checkbox"/> Dental visit
c. During the past 2 weeks, did anyone else in the family go to a dentist? If "Dental visit," ask:	Y (Reask 12b and c)	N	
d. During the past 2 weeks, how many times did -- go to a dentist?			d. _____ No. of dental visits (NP)

1 Ask question 12a once for a family.

- a Dentist - A person who has been trained in the prevention, diagnosis, and treatment of diseases of the teeth and adjacent tissues. Some examples are: Oral surgeon, orthodontist, periodontist, dental hygienist.
- b Exclude visits for dental services given on a mass basis, such as examinations given a group of children at school. If you are in doubt, include the visit and explain the circumstances in a footnote.

2 Ask questions 12b-12d as appropriate.

13

Question 13, Last Saw Dentist

13

Do not use for children 1 yr. and under.	
Mark box or ask:	13. <input type="checkbox"/> 2-week dental visit
13. ABOUT how long has it been since -- LAST went to a dentist?	<input type="checkbox"/> Past 2 weeks not reported (12)
	<input type="checkbox"/> 2 weeks-6 months
	<input type="checkbox"/> Over 6-12 months
	<input type="checkbox"/> 1 year
	<input type="checkbox"/> 2-4 years
	<input type="checkbox"/> 5+ years
	<input type="checkbox"/> Never age 1 or under

Mark the "2-week dental visit" box in question 13, without asking the question, for persons who have reported a two-week dental visit. Mark the "Never" box, without asking the question, for children age one or under even if dental visits have been reported for them. Ask 13 for all other persons and mark the appropriate answer box in each person's column as follows:

Past 2 weeks not reported - Mark this box if at this point the respondent reports a visit during the two-week reference period. Also, mark the "Dental visit" box in 12b and ask question 12d for that person. Record the new response in the answer column for this question for this person. If necessary, correct the entry in 12a.

2 weeks-6 months - Mark this box if the person's last dental visit was before the two-week reference period but within the six-month period.

Over 6-12 months - Mark this box if the person's last dental visit was between six and 12 months ago.

1 year - Mark this box if the person's last dental visit was 12 or more months ago but less than two years ago.

2-4 years - Mark this box if the person's last dental visit was two or more years ago but less than five years ago.

5+ years - Mark this box if the person's last dental visit was five or more years ago.

Never/Age 1 or under - Mark this box if the person has never visited a dentist or is one year old or under.

14

Question 14, Two-Week Doctor Visits

14

14. During the past 2 weeks (the 2 weeks outlined in red on that calendar) how many times did -- see a medical doctor?
Do not count doctors seen while a patient in a hospital.

14. None
_____ Number of visits } NP

- 1 Question 14, Two-Week Doctor Visits - Ask question 14 for each person, using the parenthetical phrase "the two weeks outlined in red on that calendar," as often as necessary. The respondent must be kept aware of the two-week period and should be referred to the calendar at convenient points in the interview, especially in a large household. The instruction following question 14 is a reminder to you to exclude doctors seen while the person was a patient in a hospital.
- 2 Medical Doctor
 - a The term "doctor" covers only medical doctors (MD) and osteopathic physicians (DO). Include all visits to medical doctors regardless of whether they are general practitioners or specialists. Ophthalmologists (occulists) have an MD degree and are counted as medical specialists.
 - b Consulting chiropractors, chiropodists, dentists, podiatrists, naturopaths, Christian Science healers, opticians, optometrists or other types of people giving medical care are not counted.
 - c Do not make a special inquiry about the kind of doctor consulted or tell the respondent the survey definition of who is considered a doctor. If the respondent volunteers that a chiropractor was seen, rephrase the question and ask "Did you see or talk to a medical doctor during the past two weeks?"
- 3 Doctor "Visit" - A single contact between a person and a doctor or the doctor's representative for the purpose of obtaining medical advice, treatment or examination.
 - a A visit by the person to the doctor, visits to a doctor's office, a clinic, a medical center and the outpatient department of a hospital where a person goes for treatment or examination but may not actually see or talk to a doctor.
 - b A visit by the doctor to the person. If the doctor visits the household to see one patient and while there examines or visits professionally another member of the household, count this visit as "doctor seen" for each individual for each condition receiving the doctor's attention. However, do not count visits by visiting nurses or physical therapists to the home unless accompanied by a doctor.
 - c Telephone calls to or from a doctor (except requests for appointments or inquiries about a bill), including calls concerning the obtaining or renewal of a prescription.

⑭ Two-Week Doctor Visits (Continued)

⑭

- d The case in which the person is a doctor and followed his/her own treatment or advice.
- e Talking on an informal basis to a family member or friend who is a doctor to obtain medical advice.
- f Exclude visits for shots or examinations (such as chest X-rays) administered on a mass basis. Thus, if the person went to a clinic, a mobile unit or some similar place to receive an immunization, a single chest X-ray or a certain diagnostic procedure which was being administered identically to all persons who were at the place for this purpose, do not count this as a visit.

NOTE: However, physicals for athletes or the armed services are not mass visits, and are included in the doctor visits questions.

- g Exclude any visits a doctor made to see the person while an inpatient in the hospital. A hospital inpatient is defined as a patient who remains overnight or longer.

⑮ Question 15, Two-Week Shots, X-Rays, Test, and Examinations

⑮

(Besides these visits)		
15a. During that 2-week period did anyone in the family go to a doctor's office or clinic for shots, X-rays, tests, or examinations?	Y N (16)	
b. Who was this? - Mark "Doctor visit" box in person's column.		15b. <input type="checkbox"/> Doctor visit
c. Anyone else?	Y (Repeat 15a and c) N	
If "Doctor visit," ask:		
d. How many times did -- visit the doctor during that period?		d. _____ Number of visits (NP)

- 1 The wording of question 15a depends on the answer to question 14. If one or more visits were reported in question 14, ask question 15a with the introductory parenthetical phrase. For example, if there were two persons in the household, head and wife, and three visits were reported in question 14 for the head, ask question 15a as follows: "Besides those visits during that two-week period, did either of you go to a doctor's office or clinic for shots, X-rays, tests, or examinations?" If no visits were reported in question 14, ask question 15a without including the parenthetical phrase. Any visits recorded in question 14 should not be recorded in question 15.
- 2 Ask questions 15b-15d as appropriate.

Question 16, Two-Week Advice by Phone

16a. During that period, did anyone in the family get any medical advice from a doctor over the telephone?	Y N (17)	
b. Who was the phone call about? - Mark "Phone call" box in person's column.		16b. <input type="checkbox"/> Phone call
c. Any calls about anyone else?	Y (Repeat 16b and c) N	
If "Phone call," ask:		
d. How many telephone calls were made to get medical advice about --- ?		d. _____ Number of calls (NP)

- 1 Ask question 16a regardless of the answers to questions 14 and 15. For this question, include telephone calls to or from the doctor or doctor's office which are related to treatment or advice given by the doctor directly or transmitted through the nurse. Do not count telephone calls solely for making an appointment, discussing a bill, or calls confined to some topic not directly related to the person's health. If telephone calls have already been reported in the earlier "visit" questions, do not record them again in question 16.
- 2 Ask questions 16b-d as appropriate.

17

Question 17, Condition Causing Two-Week Medical Advice

17

Fill item C, (DV), from 14-16 for all persons. Ask 17a for each person with visits in DV box.		<input type="checkbox"/> Condition (item C THEN 17d) <input type="checkbox"/> Pregnancy (17e) <input type="checkbox"/> No condition	
17a. For what condition did -- see or talk to a doctor during the past 2 weeks?	17a.		
b. Did -- see or talk to a doctor about any specific condition?	b.	Y	N (NP)
c. What condition?	c.	Enter condition in item C Ask 17d	
d. During that period, did -- see or talk to a doctor about any other condition?	d.	Y (17c)	N (NP)
e. During the past 2 weeks was -- sick because of her pregnancy?	e.	Y	N (17d)
f. What was the matter?	f.	Enter condition in item C (17d)	

1 Make Entry in "DV" Box in C1 - Review the entries in questions 14-16 for each person and enter the total number of doctor visits reported in the "DV" box in C1 in each person's column before going to question 17. The following illustration will give an example of how to record the visits reported in questions 14-16 in item C1.

C	1. Record the number of Bed Days, Doctor Visits.	BED DAYS	DV	HOSP.	C	BED DAYS	DV	HOSP.	BED DAYS	DV	HOSP.
		<input type="checkbox"/> None (NP)	<input type="checkbox"/> None (NP)	<input type="checkbox"/> None (NP)		<input type="checkbox"/> None (NP)	<input type="checkbox"/> None (NP)	<input checked="" type="checkbox"/> None (NP)	<input type="checkbox"/> None (NP)	<input type="checkbox"/> None (NP)	<input type="checkbox"/> None (NP)
		1	1				2				

14. During the past 2 weeks (the 2 weeks outlined in red) Do not count doctors seen while a patient in a hospital. (Besides these visits) 15a. During that 2-week period did anyone in the family clinic for shots, X-rays, tests, or examinations? b. Who was this? - Mark "Doctor visit" box in person's column. c. Anyone else? If "Doctor visit," ask: d. How many times did -- visit the doctor during that period? 16a. During that period, did anyone in the family call a doctor over the telephone? b. Who was the phone call about? - Mark "Phone call" box in person's column. c. Any calls about anyone else? If "Phone call," ask: d. How many telephone calls were made during that period?	60 <input checked="" type="checkbox"/> None } NP Number of visits	14. 60 <input checked="" type="checkbox"/> None } NP Number of visits	60 <input type="checkbox"/> None } NP Number of visits
	<input checked="" type="checkbox"/> Doctor visit	15b. <input type="checkbox"/> Doctor visit	<input type="checkbox"/> Doctor visit
	1 Number of visits (NP)	d. Number of visits (NP)	Number of visits (NP)
	<input type="checkbox"/> Phone call	16b. <input type="checkbox"/> Phone call	<input checked="" type="checkbox"/> Phone call
Number of calls (NP)	d. Number of calls (NP)	1 Number of calls (NP)	

17

Condition Causing Two-Week Medical Advice (Continued)

17

2 Question 17 - Ask question 17 for each person with doctor visits reported in questions 14-16 to find out the specific conditions causing the visit.

- a Question 17a, For What Condition - Ask question 17a, and record in item C2 each condition for that person after marking the "Condition" box. If in answer to question 17a, no specific condition is reported but the respondent reports pregnancy as the reason for the doctor visit, mark the "Pregnancy" box in that person's column. Include as visits for pregnancy, visits by the woman for consultation or checkups during the pregnancy. If the reason for the doctor visit(s) was for an examination or preventive care only, mark the "No condition" box in question 17a; for example, to obtain birth control pills. Also mark the "No condition" box if the reason for the visit was a test to see if the person had the condition. For example, a glaucoma test, TB test, diabetes test or a pap smear for cancer. Do not enter the condition in C2 unless the person has the condition.
- b Questions 17b and c, Any Specific Condition - Ask question 17b as an additional probe to determine if the person saw the doctor about any specific condition, and if so, what that condition was. Record all conditions reported in answer to 17c in item C2.
- c Question 17d, Any Other Condition - Ask question 17d as a reminder to the respondent about any other condition for which treatment or advice was received during the doctor visit(s). Once you get a "No" response to question 17d, go to the next person and ask question 17a, if it is required.
- d Questions 17e and f, Pregnancy - Ask questions 17e and f only if you marked the "Pregnancy" box in question 17a.
 - 1) Question 17e, Sick Because of Pregnancy - The purpose of 17e is to find out if there was any sickness during the past two weeks because of the pregnancy. Do not consider pregnancy as an illness condition and do not record it in item C2 unless there were some complications or illness conditions associated with it during the past two weeks. "Sick" means whatever the respondent thinks it means--make no attempt to define it.
 - 2) Question 17f, Condition of Pregnancy - If the respondent reports some sickness during the past two weeks because of the pregnancy ("Yes" in 17e), ask question 17f and record the condition in item C2 for that person.

NOTE: If an operation or surgery is reported as the reason for the doctor visit, probe to determine the condition causing the operation and enter that in C2, regardless of whether the person still has the condition.

18

Question 18, Twelve-Month Doctor Visits

18

<p>18a. During the past 12 months, (that is since _____ date) _____ a year ago, about how many times did -- see or talk to a medical doctor? (Do not count doctors seen while a patient in a hospital.) (Include the -- visits you already told me about.)</p>	<p>18a. <input type="checkbox"/> Only when in hospital <input type="checkbox"/> None Number of visits</p>
<p>b. ABOUT how long has it been since -- LAST saw or talked to a medical doctor? Include doctors seen while a patient in a hospital.</p>	<p>b. <input type="checkbox"/> 1 2-week DV <input type="checkbox"/> 2 Past 2 weeks not reported (14 and 17) <input type="checkbox"/> 3 2 wks.-6 mos. <input type="checkbox"/> 4 Over 6-12 mos. <input type="checkbox"/> 5 1 year <input type="checkbox"/> 6 2-4 years <input type="checkbox"/> 7 5+ years <input type="checkbox"/> 8 Never</p>

- 1 Ask both parts of question 18 as a block for each person after completing question 17 for all family members. Do not include dental visits in question 18. If you learn reported visits are dental visits, rephrase the questions to "Exclude the dental visit you told me about," and "... last saw or talked to a medical doctor, not counting the dentist?"
- 2 Question 18a, Twelve-Month Doctor Visits - Ask question 18a inserting the date entered in "Reference dates" for "12-month Bed Days, and Doctor Visit probe" and include the first parenthetical statement the first time the question is asked and at any other time you feel it necessary. If any two-week doctor visits have been reported for this person, include the second parenthetical statement inserting the number of doctor visits previously reported for the dashes.
 - a If "checkup" is mentioned, rephrase the question by asking "Including any visits for a checkup, how many separate visits did you make to a doctor since -- a year ago?" Here, as in the dental visit question, we want to count each visit.
 - b If you learn that any of the visits reported in question 14 or 15 occurred while the person was a patient in the hospital, correct the answer(s) to exclude the inpatient visits. If all of the person's visits during the 12-month period were while in the hospital, mark the "Only when in hospital" box.
- 3 Question 18b, Interval Since Last Saw Doctor - The instruction following 18b is a reminder to you that seeing a doctor while a hospital inpatient is included in 18b, but not in 18a.

Mark the "2-week DV" box in 18b, without asking the question, for persons who have reported a two-week doctor visit. Ask 18b for all other persons and mark the appropriate answer box in each person's column as follows:

18 Twelve-Month Doctor Visits (Continued)

18

Past 2 weeks not reported - Mark this box if at this point the respondent reports a visit during the two-week reference period.

Reask questions 14 and 17 for that person and make the necessary corrections in these questions. Correct the entry in the "DV" box in item C1 for that person, record in item C2 any new condition reported and verify or correct 18a.

Make corrections to the two-week doctor visit probe questions only when asking this question. Do not change the entries in questions 14-16 because of any information given later in the interview but do correct C1.

NOTE: If the doctor was seen during the past two weeks only while the person was an inpatient in a hospital, do not mark a box in 18b. Footnote "2 Wk. DV. while a patient in hospital."

Mark the remaining answer categories using the rules given for question 13.

19 20

Questions 19 and 20, Major Activity

19 20

Ages 17+	<p>19a. What was -- doing MOST OF THE PAST 12 MONTHS -- (For males): working or doing something else? If "something else," ask: b. What was -- doing? If 45+ years and was not "working," "keeping house," or "going to school," ask: c. Is -- retired? d. If "retired," ask: Did he retire because of his health?</p>	<p>19. & 20.</p> <p>1 <input type="checkbox"/> Working (24a) 2 <input type="checkbox"/> Keeping house (24b) 3 <input type="checkbox"/> Retired, health (23) 4 <input type="checkbox"/> Retired, other (23) 5 <input type="checkbox"/> Going to school (28) 6 <input type="checkbox"/> 17+ something else (23) 7 <input type="checkbox"/> 6-16 something else (23)</p>
Ages 6-16	<p>20a. What was -- doing MOST OF THE PAST 12 MONTHS -- going to school or doing something else? If "something else," ask: b. What was -- doing?</p>	
Ages Under 6		<p>8 <input type="checkbox"/> 1-5 years (21) 9 <input type="checkbox"/> Under 1 (22)</p>

1 Ask questions 19-28 as a block for each person. Ask all persons 17 years or older question 19a first; all persons 6-16 years of age question 20a first. For children under six, mark either the "1-5 years" box or the "Under 1" box.

2 Questions 19 and 20, Main Activity During Past 12 Months - Emphasize the phrase "most of the past 12 months" to remind the respondent you are referring to the entire year, not just to the present time. If more than one kind of activity is reported for a person, mark the activity at which the most time was spent during the past 12 months. Thus if a woman has kept house and also worked, mark the box which describes the activity that took up most of her time during the past 12 months. If the person spent equal time at two types of activities, select the one which the person considers more important.

a How to Ask Questions 19a-d, Persons Aged 17 Years and Over - When asking these questions for males, ask question 19a as follows: "What was -- doing MOST OF THE PAST 12 MONTHS (pause) working or doing something else?" Ask the question similarly for females, but use the alternate wording.

- 1) If the response to 19a fits any of the appropriate boxes, "Working," "Keeping house," (even for men), or "Going to school," mark that box.
- 2) If the response is "Something else," ask question 19b. If this response corresponds to one of the check boxes, mark the appropriate one. If the response is "Retired," ask 19d. If the person is aged 17-44 and the response to 19b does not correspond to one of the first five check boxes, mark the "17+ something else" box.

- 3) If the person is 45 years old or over and the response to question 19b does not correspond to one of the first five check boxes, ask question 19c. If the response to question 19c is "Yes," ask 19d. If the response to 19c is "No," mark the "17+ something else" box.
 - 4) If the response to any part of 19a-c is "Retired," ask 19d. If this is "Yes," mark the "Retired, health" box. If any other reason for retirement is given, or if the response is "No," mark the "Retired, other" box.
 - 5) Consider persons in the Armed Forces most of the past 12 months and now separated from the service, as "17+ something else" unless they are 45+ and you have determined they are retired. For these persons, ask 19d.
- b Questions 20a and b, Persons 6-16 Years of Age - If the response is "Going to school," "Working" or "Keeping house," mark the appropriate box and follow the instructions in the parentheses. If "Something else" is the response, ask question 20b. If the response to 20b cannot be assigned to one of the check boxes, mark the "6-16 something else" box.

21

Question 21, Limitation of Activity for Children 1-5 Years of Age

21

21a. Is -- able to take part at all in ordinary play with other children?	21a.	Y	N (28)
b. Is he limited in the kind of play he can do because of his health?	b.	Y (28)	N
c. Is he limited in the amount of play because of his health?	c.	Y (28)	N (27)

If a child is unable to play strenuous games or is unable to run or jump or climb because of health, consider this as limited in the "kind of play." (21b)

If a child needs special rest periods or is unable to play for long periods at a time because of health, consider this as limited in the "amount of play." (21c)

22

Question 22, Limitation of Activity for Children Under One year of Age

22

22a. Is -- limited in any way because of his health?	22a.	Y	N (NP)
b. In what way is he limited? Record limitation, not condition.	b.	(28)	

If a condition is given in response to question 22a or b, reask 22b to determine how the child is limited. Enter the condition if no other information is given. A limitation of a child under one year of age might include extra long rest periods, limited play activity, and so forth.

23

Question 23, Retired or "17-Something Else"

23

23a. Does -- health now keep him from working?	23a.	1 Y (28)	N
b. Is he limited in the kind of work he could do because of his health?	b.	2 Y (28)	N
c. Is he limited in the amount of work he could do because of his health?	c.	2 Y (28)	N
d. Is he limited in the kind or amount of other activities because of his health?	d.	3 Y (28)	N (27)

- 1 Question 23a, Health Keeps from Working - If the person's major activity was reported as "Retired, health," "Retired, other" or "17+ something else," ask question 23a to find out if health presently keeps the person from working. Many times a person who has retired from one job because of health is able to do some other kind of work, for example, the bricklayer who retired because of a bad back is now the manager of a retail liquor store.
- 2 Question 23b, Limited in Kind of Work - Ask question 23b to determine if health would limit the kind of work a person could do if he/she were to work. Since the person, in most cases, will not presently be working, the word "could" in 23b and c is used to convey the idea that if the person were presently working, would health cause limitation.
- 3 Question 23c, Limited in Amount of Work - Ask question 23c to determine if health would limit the amount of work a person could do if the person were to work.
- 4 Question 23d, Limitation in Kind or Amount of Other Activities - Ask question 23d to determine if health limits the kind or amount of the person's other activities. Other activities include anything other than work, such as recreation, sports, hobbies, church, etc.

24

Question 24, Limited in Kind or Amount of Work or Housework

24

a. Does -- NOW have a job?	24a.	Y (24c)	N
b. In terms of health, is -- UNABLE to (work -- keep house) at all?	b.	Y	N (26)
c. Is he limited in the kind of (work -- housework) he can do because of his health?	c.	Y (28)	N
d. Is he limited in the amount of (work -- housework) he can do because of his health?	d.	Y (28)	N
e. Is he limited in the kind or amount of other activities because of his health?	e.	Y (26)	N (27)

- 1 Question 24a, Now Have a Job - Ask question 24a of all persons who reported "Working" in question 19 or 20 to determine if they presently have a job.
- 2 Question 24b, Now Able to Work or Keep House at All - Ask question 24b of all persons whose usual activity was working, but who do not have a job now, and of persons whose usual activity was keeping house. When asking 24b-d, select the appropriate word within the parentheses.

The concept of "unable" means general overall inability to work or keep house because of some illness or injury.

- 3 Question 24c, Limited in Kind of Work or Housework - Consider as limited in kind of work a person who is unable to do certain kinds of manual work because of health, such as lifting or carrying materials, or a person who is unable to work where a lot of standing or walking is required.

Consider as limited in kind of housework a housewife who is unable to do certain kinds of housework which require her to lift heavy materials or do strenuous housework, such as scrubbing floors.

- 4 Question 24d, Limited in Amount of Work or Housework - Consider a person who is unable to work full time or must have periodic rest periods because of health as being limited in amount of work or housework.
- 5 Question 24e, Limited in Other Activities - Ask question 24e to determine if persons, although not limited in their main activity, are limited in other types of activities. Limited in kind or amount of other activities refers to those persons who are only limited in their outside activities, for example, limitations in participating in sports, clubs, hobbies, church, civic projects, athletics, games, etc.

25. In terms of health would -- be able to go to school?	25.	Y	N (NA)
26a. Does (would) -- have to go to a certain type of school because of his health?	26a.	Y (27)	N
b. Is he (would he be) limited in school attendance because of his health?	b.	Y (28)	N
c. Is he limited in the kind or amount of other activities because of his health?	c.	Y (29)	N

- 1 Question 25, Able to go to School - Ask question 25 only if the "6-16 something else" box is marked in questions 19 and 20 to determine if the person is able to go to school, although the major activity during the past 12 months was something else.
- 2 Question 26, Limited to Certain Types of Schools or Kind of School Activity - Ask question 26 about those persons reported in questions 19 and 20 as "Going to school" or "6-16 something else" but able to go to school ("Y" circled in 25).
 - a Questions 26a and b, Limited to Certain Types of Schools or in School Attendance - When "Y" has been circled in 25, ask 26a and b using the parenthetical phrase (would) and (would he be). Consider a person who attends a special school or a person who can attend school for only part of a day as being limited.
 - b Question 26c, Limited in Kind or Amount of Other Activities - Ask question 26c to determine if a person, although not limited in school attendance, is limited in other types of activities. For purposes of this question, other activities might include participation in various recreation or sporting activities.

27

Question 27, Limited in ANY WAY

27

27a. Is he limited in ANY WAY because of a disability or health?	27a. Y	27a. N (NP)
b. In what way is he limited? Record limitation, not condition.		

Ask question 27 about all persons 1+ years of age who did not report any activity limitation in question 21, 23, 24, or 26. This question serves to remind the respondent of limitations that were not reported in answer to earlier questions. "Disability" is included in question 27, because some people do not think of missing limbs, blindness, and things of that nature as health problems. If you are aware of such a situation, do not probe or record it unless the respondent reports it. If a condition is given in response to question 27a or b, reask 27b to determine how the person is limited. Enter the condition if no other information is given.

28

Question 28, How Long Limited and Cause

28

<p>28a. About how long has he { been limited in -- been unable to -- had to go to a certain type of school? }</p>	<p>28a. 000 <input type="checkbox"/> Less than 1 month 1 ____ Mos. 2 ____ Yrs.</p>
<p>b. What (other) condition causes this limitation? N "old age" only, ask: Is this limitation caused by any specific condition?</p>	<p>b. Enter condition in item C Ask 28c <input type="checkbox"/> Old age only (NIP)</p>
<p>c. Is this limitation caused by any other condition?</p>	<p>c. Y (Reask 28a and c) N <input type="checkbox"/> Only 1 condition</p>
<p>Mark box or ask: d. Which of these conditions would you say is the MAIN cause of his limitation?</p>	<p>d. Enter main condition</p>

1 Ask question 28 of all persons who reported some kind of activity limitation in questions 21-27 to determine how long the person had this limitation and what condition causes it.

2 How Long Had This Limitation - In question 28a, we want to know the length of time the person has been limited by this health problem, not how long the condition has been present.

- a In asking question 28a choose the appropriate phrase within the brackets and add to it the italicized portion of the question where the limitation was reported. For example, if the response to 23b was "Yes," ask question 28a: "About how long has John been limited in the kind of work he could do?"
- b If the limitation is reported in question 23a, ask question 28a as: "About how long has John been unable to work?"
- c When a limitation is reported in question 22 or 27, insert the respondent's description of the limitation when asking 28, for example, "About how long has John been unable to drive a car?" If the final answer to question 22 or 27 is a condition, ask question 28, "About how long has John been limited by his ...?"

3 Questions 28b-d, Condition Causing Limitation - Ask questions 28b-d to determine what condition causes a person's activity limitation and if more than one is reported, which one is the main cause of the limitation. Record the condition(s) in item C2 using "28" as the source.

- a How to Ask - Ask question 28b, enter the condition in that person's column in item C2, and then go to 28c. Continue to reask 28b, using the parenthetical "other," and 28c until a "no" is obtained.

If you have received a condition in response to question 22 or 27, record the condition and 28 in C2, skip 28b and ask 28c.

28

How Long Limited and Cause (Continued)

28

b "Old Age" is Reported - Occasionally the answer given to question 28b will be "Old age." Do not enter "Old age" in item C2. Instead, ask the alternate question below question 28b and record the condition(s) in item C2. If the limitation can be attributed to no other condition, mark the "Old age only" box and go to the next person.

c Limitations Due to Pregnancy or Recent Injuries - If the only condition(s) reported in answer to question 28 is pregnancy, delivery or an injury which occurred less than three months ago, for example, a broken leg, which did not result in obvious permanent disability, enter the name of the condition in a footnote, but do not make an entry in C2. Reask the question which picked up the limitation using an introductory statement, such as "Except for your broken leg, would you be limited in the kind of work you could do because of your health?" and correct the original entry. Continue to ask any other appropriate limitation questions for this person.

This applies whether these conditions were reported alone or with other conditions. Pregnancy and recent injuries are not considered as limitations covered by these questions.

d Main Condition - Question 28d determines which condition is the main cause of a person's activity limitation when two or more conditions have been reported in questions 28b and c.

- 1) If only one condition has been reported in questions 28b and c, mark the "Only one condition" box in that person's column, and omit question 28d.
- 2) After asking question 28d, enter the condition that the respondent says is the main cause of the activity limitation in the answer space for that person, then go to the next person. If in response to question 28d, the respondent mentions a condition not previously reported, enter that condition in 28d and also in item C2.
- 3) If the respondent is unable to determine the main cause from several, indicate this by an entry of "unable to select main cause," "all the same," "both," or something similar.

NOTE: If an operation or surgery is reported as the reason for the limitation, probe to determine the condition causing the operation and enter that in C2, regardless of whether the person still has the condition.

29

Question 29, Hospitalizations Since Specified Date

29

29a. Was -- a patient in a hospital at any time since (date) a year ago?	29a. Y N (None C)
b. How many times was -- in a hospital since (date) a year ago?	b. Times (from C)

- 1 Although the survey is primarily concerned with hospitalizations which occurred during the past 12 months, for statistical purposes, we also need to know about hospitalizations which occurred just before the past 12 months. In this way we obtain information about hospitalizations which started before the "past 12 months" and extended into the 12-month period. For these reasons the hospitalization probe question is asked for a period of 13 to 14 months.
- 2 Ask question 29a separately for each household member, inserting the "Reference date" entered in C2 for the "Hospital probe." If no hospitalizations are reported, circle "N" in 29a and mark the "None" box in the "HOSP." column in item C1 for this person.
- 3 Ask 29b for each person for whom the answer to question 29a is "Yes." Enter the number of times in the column for that person and in the "HOSP." box of item C1.
- 4 Patient in a hospital - being admitted and staying overnight or longer in a hospital. Exclude visits to emergency rooms, or outpatient clinics.

30

Question 30, Stays in Nursing Homes, Etc.

30

30a. Was anyone in the family in a nursing home, convalescent home, or similar place since _____ (date) _____ a year ago?	Y	N (31)	30b. Y
b. Who was this? - Circle "Y" in person's column. If "Y," ask _____			c. _____ Times (Item C)

- 1 "Nursing home, convalescent home or similar place," means any type of home, sanitarium or other such type of place which provides medical or personal care to persons because of health reasons, advanced age or the like. Unlike patients in general hospitals, patients in these places usually remain for long periods of time. Examples of these places are: Nursing homes, mental institutions, TB sanitariums, convalescent homes, homes for the aged, etc. The length of time a person may have been a patient in a place of this type does not affect its inclusion as long as the person is a household member at the time of interview.

- 2 If one or more nursing home "stays" are reported, record the number in 30c, then go to the "HOSP." box in item C1. Correct the previous entry for this person and enter the total number of hospital and nursing home "stays" reported in 29 and 30.

Question 31, Check on Question 29

Ask for each child 1 year old or under if date of birth is on or after reference date.			
31a. Was --- born in a hospital? If "Yes," and no hospitalizations entered in his and/or mother's column, enter "1" in 29b and item C. If "Yes," and a hospitalization is entered for the mother and/or baby, ask 31b for each.		31a.	Y N (NP)
----- b. Is this hospitalization included in the number you gave me for ---? If "No," correct entries in 29 and item C for mother and/or baby.		b.	Y N

- 1 Question 31 insures that hospitalizations for deliveries or births are counted. If no baby aged one or under is listed, make no entries in question 31 but go to question 32.
- 2 Question 31a - If a child aged one or under is listed on the questionnaire, look at question 3 of the column in which the baby is listed. If the baby's birth date is before the reference date, no further questions or entries for question 31 are required.

If the baby was born within the hospital reference period (on or after the date entered in C2 and before last Sunday (midnight)), ask question 31a. If the answer to this question is "Yes," check question 29b for both the baby and the mother to see if any hospitalizations have been reported. If no hospitalizations have been reported for either the baby or the mother, enter "1" in question 29b for both the baby and the mother. If a hospitalization has been reported for the mother but not the baby (or vice versa), enter "1" in question 29b for the baby and ask question 31b for the mother (or vice versa). If a hospitalization has been reported in question 29b for both the baby and the mother, then ask 31b for both the baby and the mother.

- 3 Question 31b - Ask and mark question 31b for the baby and the mother if any hospitalizations were reported in question 29b for either, and you have determined in answer to question 31a that the baby was born in a hospital within the reference period. If the answer to 31b is "No," change the entry in 29b and item C to reflect this "missed" hospitalization.
- 4 Typical Situations - Here are two examples which illustrate the procedure:
 - a You are interviewing in January 1979. You have an 18-month old child listed on the questionnaire as a one-year old, with question 3, date of birth, as July 7, 1977, (the reference date for the hospital probe is December 1). Since the baby was not born within the time reference period, you do not need to make any entries in question 31.

③① Check on Question 29 (Continued)

③①

- b Or, for example, there is a baby listed as "Und. 1." The baby's birth date is within the reference period so you ask question 3la, "Was the baby born in a hospital?" You find out that the baby was born in a hospital but see that no hospitalizations have been recorded in question 29b for the baby, but two hospitalizations have been recorded in question 29b for the mother. The instruction for 3la tells you to enter "1" in 29b and item C for the baby and ask question 3lb for the mother to determine if the two hospitalizations already entered in 29b for her include her hospitalization for the baby's delivery. You find that it does not, so change the "2" hospitalizations already recorded in question 29b and in item C for the mother to "3."
- 5 In filling this question, remember that question 3la refers only to the baby and the entries should appear only in that column of the questionnaire. For question 3lb, the entries can apply either to the mother or the baby or both, depending on whether either or both had a hospitalization reported in question 29b.

Question 32, Condition List

- 1 Question 32 contains 6 lists of selected conditions that affect different systems of the body. Refer to the number entered in item L to determine which condition list to ask. Ask only one list in each household.

If you are questioned as to the meaning of any of the listed terms, use the definitions printed on the questionnaire for that particular list. Do not attempt to explain or define any of the conditions further.

The basic rules for all 6 lists are the same.

- a Begin each list with question 32a, inserting the names or relationships of all family members for the parentheses the first time you ask the question and emphasize the reference period for the list you are asking. Then read the first listed condition. Record all conditions reported while asking question 32, even if the condition is not specifically listed, if the condition is present during the particular reference period you are asking about. An additional probe may be necessary to determine this.

After reading each condition, wait for a "Yes" or "No" reply before going to the next condition. This procedure is necessary in order to be certain the respondent has had time to think about each condition. If two or more respondents are present, wait for each person to reply to a condition before going on to the next condition. As you ask each condition, make a check mark (✓) in the column to the right of it to keep your place in the list.

- b When you receive a "Yes" response, ask question 32b, "Who is (or was) this?" and record the condition and letter in item C2 in the appropriate person's column. If a "Yes" response is given to two or more conditions listed together, ask additional probes as necessary to determine which condition or part of body is involved and enter this response in C2.
- c Then ask 32c for the condition. For example, "Does anyone else have glaucoma?" If "Yes," ask 32b and enter the condition and letter in item C2 in that person's column. Continue reasking 32b and c until you receive a final "No" answer to that condition. Then ask about the remaining conditions by reasking the main question without the parenthetical phrase. This is to remind the respondent that we are interested in whether anyone in the family has or had any of the remaining conditions.

③ Condition List (continued)

③

- d If the same condition is reported more than once for the same person in question 32, enter only the letter for the item where it was first reported. Thus, you will have only one letter per condition for a person in item C2. It is extremely important that the letter be entered in C2 so that you will ask the correct questions on the Condition page.
- 2 If a condition is given out of turn or not in answer to the one you're asking about, probe to determine if the condition was present during the reference period. If so, enter the condition and letter at which it was reported in C2 and reask the question about the listed condition you just mentioned.
- 3 Throughout the lists of conditions there are "catch-all" groups containing the words "any other" or "any disease of" with a part of body italicized. Whenever an italicized part of body included in these "any other" groups is reported prior to the asking of the condition lists, consider them to be question 32 conditions. Enter the appropriate letter beside the condition in C2 and rephrase the question to exclude that person's condition. For example, "Besides your upset stomach, during the past 12 months did anyone in the family have any other stomach trouble?"
- Keep in mind however, that the part of body must be reported exactly as shown in the condition list you are using in that household.
- If the respondent just says "Yes" to a "catch-all" group without reporting a specific condition, record the listed item verbatim in C2; for example, "Bladder trouble." Do not probe at this time to obtain a definite condition.
- 4 When a SPECIFIC condition in question 32 has already been reported prior to the asking of the condition lists, also enter the appropriate letter beside the condition in C2 and rephrase the question when you come to that condition, excluding that person's condition. For example "Besides your arthritis, during the past 12 months, did anyone in the family have arthritis of any kind or rheumatism?"
- 5 Also, throughout the condition lists there are certain words that are in all capital letters. Emphasize these words when asking about these conditions so the respondent is aware of them. An additional probe may be necessary.

If the respondent just says "yes" to one of these conditions, a probe is unnecessary, enter the condition in C2. However, if the person gives a qualified answer, such as "Yes, I have flatfeet," probe to determine if the person has "TROUBLE." Whenever you enter one of these conditions from the list in C2, you must enter the qualifier, abbreviated to "Tr/w" or "Rep.TR/w" along with the condition.

If one of the conditions was reported prior to question 32 without the qualifier, enter the appropriate letter beside the condition in C2 and rephrase the question, for example; if "10 acne" is in C2 ask, "Besides yourself, during the past 12 months, did anyone in the family have TROUBLE with acne?" In these cases it is not necessary to enter "Tr/w" or "Rep/Tr" next to the condition already entered in C2. However, if the condition is first reported in question 32, you are to enter "Tr/w", or "Rep.Tr/w" in C2.

<p>1</p>	<p>32a. DURING THE PAST 12 MONTHS, did anyone in the family (you, your --, etc.) have -</p> <p>If "Yes," ask 32b and c.</p> <p>b. Who was this? Enter name of condition and letter of line where reported in appropriate person's column in item C.</p> <p>c. During the past 12 months, did anyone else have ...?</p> <p>Conditions affecting the digestive system.</p> <p>Make no entry in item C for cold, flu, or grippe even if reported in question 32.</p>	<p>A. Gallstones?</p> <p>B. Any other gallbladder trouble?</p> <p>C. Cirrhosis of the liver?</p> <p>D. Fatty liver?</p> <p>E. Hepatitis?</p> <p>F. Yellow jaundice?</p> <p>G. Any other liver trouble?</p> <p>H. Diabetes?</p>	<p>I. Any disease of the pancreas?</p> <p>J. Ulcer?</p> <p>K. Hernia or rupture?</p> <p>L. A disease of the esophagus?</p> <p>M. Gastritis?</p> <p>N. FREQUENT indigestion?</p> <p>O. Any other stomach trouble?</p> <p>P. Enteritis?</p>
<p>1</p>	<p>32a. DURING THE PAST 12 MONTHS, did anyone in the family have -</p> <p>If "Yes," ask 32b and c.</p> <p>b. Who was this? Enter in item C.</p> <p>c. During the past 12 months, did anyone else have ...?</p> <p>Conditions affecting the digestive system.</p> <p>Make no entry in item C for cold, flu, or grippe even if reported in question 32.</p>	<p>Q. Diverticulitis?</p> <p>R. Colitis?</p> <p>S. Spastic colon?</p> <p>T. FREQUENT constipation?</p> <p>U. Any other bowel trouble?</p> <p>V. Any other intestinal trouble?</p>	<p>W. Cancer of the stomach, colon or rectum?</p> <p>X. During the past 12 months, did anyone in the family have any other condition of the digestive system? If "Yes," ask: Who was this? - What was the condition? (Enter in item C)</p>

A Condition list 1 contains selected conditions that affect the digestive system. Keep in mind the 12-month reference period when asking this list.

- 1 Do not consider flu, grippe, or cold as 32 conditions and do not record them in C2 even if answered in response to list 1. For example, "stomach flu" or "cold" would not be considered a 32 condition.
- 2 In item X, do not consider other digestive conditions reported earlier as 32 conditions unless they are reported while asking this condition list. For example, do not consider gastroenteritis as a digestive condition unless reported while asking list 1.

Condition List (continued)

2	<p>32a. Does anyone in the family (you, your --, etc.) NOW have - If "Yes," ask 32b and c.</p> <p>b. Who is this? Enter name of condition and letter of line where reported in appropriate person's column in item C.</p> <p>c. Does anyone else have . . . ?</p>	<p>A. Permanent stiffness or any deformity of the feet, leg, fingers, arm or back? (Permanent stiffness - joints will not move at all)</p> <hr/> <p>B. Paralysis of any kind?</p>	
2	<p>32d. DURING THE PAST 12 MONTHS, did anyone in the family (you, your --, etc.) have - If "Yes," ask 32e and f.</p> <p>e. Who was this? Enter name of condition and letter of line where reported in appropriate person's column in item C.</p> <p>f. During the past 12 months, did anyone else have . . . ?</p> <p>Conditions C-N and V are conditions affecting the bone and muscle.</p>	<p>C. Arthritis of any kind or Rheumatism?</p> <hr/> <p>D. Gout?</p> <hr/> <p>E. Lumbago?</p> <hr/> <p>F. Osteomyelitis? (os-tee-oh-my-uh-lite-iss)</p> <hr/> <p>G. A bone cyst or bone spur?</p> <hr/> <p>H. Any other disease of the bone or cartilage?</p>	<p>I. Trick knee?</p> <hr/> <p>J. A slipped or ruptured disc?</p> <hr/> <p>K. Curvature of the spine?</p> <hr/> <p>L. REPEATED trouble with neck, back, or spine?</p> <hr/> <p>M. Bursitis or Synovitis? (sin-uh-vite-iss)</p> <hr/> <p>N. Any disease of the muscles or tendons?</p>
2	<p>32e. DURING THE PAST 12 MONTHS, did anyone in the family have -</p> <p>If "Yes," ask 32e and f.</p> <p>a. Who was this? Enter in item C.</p> <p>f. During the past 12 months, did anyone else have . . . ?</p> <p>Conditions O-U and W-Z are conditions affecting the skin.</p>	<p>O. A tumor, cyst or growth of the skin?</p> <hr/> <p>P. Eczema or psoriasis? (so-rye-uh-sis)</p> <hr/> <p>Q. TROUBLE with dry or itching skin?</p> <hr/> <p>R. TROUBLE with acne?</p> <hr/> <p>S. A skin ulcer?</p> <hr/> <p>T. Any kind of skin allergy?</p>	<p>U. Dermatitis or any other skin trouble?</p> <hr/> <p>V. TROUBLE with fallen arches, flatfeet or clubfeet?</p> <hr/> <p>W. TROUBLE with ingrown toenails or fingernails?</p> <hr/> <p>X. TROUBLE with bunions, corns, or calluses?</p> <hr/> <p>Y. A disease of the hair or scalp?</p> <hr/> <p>Z. Any disease of the lymph or sweat glands?</p>

B List 2 consists of selected musculoskeletal and skin conditions and is made up of two parts. The first part contains two conditions that must be present NOW, that is, as of last Sunday night.

The second part of this list, conditions C through Z, do NOT have to be present now, but must have been present at some time DURING THE PAST 12 MONTHS.

3	<p>32a. DURING THE PAST 12 MONTHS, did anyone in the family (you, your --, etc.) have --</p> <p>If "Yes," ask 32b and c.</p> <p>b. Who was this? Enter name of condition and letter of line where reported in appropriate person's column in item C.</p> <p>c. During the past 12 months, did anyone else have ...?</p>	A. Goiter or other thyroid trouble?	}	Glandular disorders		
		B. Diabetes?				
		C. Cystic fibrosis?				
				D. Anemia?	}	Blood disorder
				E. Epilepsy?		
				F. Multiple sclerosis?	}	Conditions affecting the nervous system
				G. Migraine?		
3	<p>32a. DURING THE PAST 12 MONTHS, did anyone in the family have --</p> <p>If "Yes," ask 32b and c.</p> <p>b. Who was this? Enter in item C.</p> <p>c. During the past 12 months, did anyone else have ...?</p>	H. Neuralgia or neuritis?	}	Conditions affecting the nervous system		
		I. Sciatica?				
		J. Nephritis?	}	Genito-urinary conditions		
		K. Kidney stones?				
		L. Any other kidney trouble?				
		M. Bladder trouble?				
		N. Prostate trouble?				
		O. Disease of the uterus or ovary?				
P. Any other female trouble?						

C List 3 contains conditions of the genito-urinary and nervous system and glandular disorders. The reference period for this list is the PAST 12 MONTHS.

NOTE: Do not ask item N, prostate trouble, in an all female household, and conversely, do not ask items O and P, disease of the uterus or ovary and any other female trouble in an all male household.

32 Condition List (continued)

32

4	<p>32a. Does anyone in the family (you, your --, etc.) NOW have -- If "Yes," ask 32b and c.</p> <p>b. Who is this? -- Enter name, of condition and letter of line where reported in appropriate person's column in item C.</p> <p>c. Does anyone else have . . . ?</p> <p>A-L are conditions affecting { hearing vision speech }</p>	<p>A. Deafness in one or both ears?</p> <p>B. Any other trouble hearing with one or both ears?</p> <p>C. Tinnitus or ringing in the ears?</p> <p>D. Blindness in one or both eyes?</p> <p>E. Cataracts?</p> <p>F. Glaucoma?</p> <p>G. Color blindness?</p>	<p>H. A detached retina or any other condition of the retina?</p> <p>I. Any other trouble seeing with one or both eyes even when wearing glasses?</p> <p>J. A cleft palate or harelip?</p> <p>K. Stammering or stuttering?</p> <p>L. Any other speech defect?</p> <p>M. A missing finger, hand, or arm, toe, foot, or leg?</p> <p>N. A missing (breast), kidney or lung?</p>
4	<p>32a. Does anyone in the family NOW have -- If "Yes," ask 32b and c.</p> <p>b. Who is this? Enter in item C.</p> <p>c. Does anyone else have . . . ?</p> <p>Conditions O-W are impairments.</p> <p>Conditions Y and Z affect the nervous system.</p>	<p>O. Palsy or cerebral palsy?</p> <p>P. Paralysis of any kind?</p> <p>Q. Curvature of the spine?</p> <p>R. REPEATED trouble with back or spine?</p> <p>S. Any TROUBLE with fallen arches or flatfeet?</p> <p>T. A clubfoot?</p>	<p>U. PERMANENT stiffness or any deformity of the back, foot, or leg? (Permanent stiffness -- joints will not move at all)</p> <p>V. PERMANENT stiffness or any deformity of the fingers, hand, or arm?</p> <p>W. Mental retardation?</p> <p>X. Any condition caused by an old accident or injury? If "Yes," ask: What is the condition?</p> <p>Y. Epilepsy?</p> <p>Z. REPEATED convulsions, seizures, or blackouts?</p>

D List 4 contains selected conditions that usually cause some kind of disability or limitation and the reference period is "NOW."

"Now" refers to the present time, that is, as of "last Sunday night." If a person has had any of the listed conditions but they have been corrected by surgery or some other means and are not present now, do not enter them in C2. For example, a cataract that was removed 6 months ago, or temporary paralysis caused by a stroke with no present effects now, would not be recorded in C2.

1 For "REPEATED" conditions, the condition need not have been present as of last Sunday night if the person is subject to periodic recurring attacks of the condition. For example, a convulsion would not have to have happened as of last Sunday night if the person frequently experiences convulsions.

4

4

- 2 Do not include "breast" when asking item N in an all male household.
- 3 If the person earlier reported a condition which you know is a deformity, such as a short leg, do not enter "U" in C2 unless the condition is reported when asking list 4.
- 4 If the term "retina" is in C2, enter H next to this condition. However, do not consider retinitis as a 32 condition unless it is reported while asking list 4. The word "retina" must appear to be considered as a 32 condition.
- 5 If questions arise, an old accident in item X is one which happened three or more months ago.

32 Condition list (continued)

5

32

5

5	<p>32a. Has anyone in the family (you, your —, etc.) EVER had — If "Yes," ask 32b and c.</p> <p>b. Who was this? — Enter name of condition and letter of line where reported in appropriate person's column in item C.</p> <p>c. Has anyone else ever had...? Conditions affecting the heart and circulatory system.</p>	A. Rheumatic fever?	G. Stroke or a cerebrovascular accident?
		B. Rheumatic heart disease?	H. Hemorrhage of the brain?
		C. Hardening of the arteries or arteriosclerosis?	I. Angina pectoris?
		D. Congenital heart disease?	J. Myocardial infarction?
		E. Coronary heart disease?	K. Any other heart attack?
		F. High blood pressure?	
5	<p>32a. DURING THE PAST 12 MONTHS, did anyone in the family (you, your —, etc.) have — If "Yes," ask 32b and c.</p> <p>b. Who was this? Enter in item C.</p> <p>c. During the past 12 months did anyone else have...? Conditions affecting the heart and circulatory system.</p>	L. Damaged heart valves?	R. Gangrene?
		M. Tachycardia or rapid heart?	S. Varicose veins?
		N. Heart murmur?	T. Hemorrhoids or piles?
		O. Any other heart trouble?	U. Phlebitis or thrombophlebitis?
		P. Aneurysm?	V. Any other condition affecting blood circulation?
		Q. Any blood clots?	

E List 5 contains selected conditions that affect the heart and circulatory system.

Notice that this condition list has different reference periods. Conditions A - K have a reference period of EVER had and conditions L - V refer only to the PAST 12 MONTHS.

Record in item C2 any condition reported while asking conditions A - K regardless of whether or not the condition was present during the past 12 months or is present now.

For L - V conditions, record in C2 only those conditions which were present during the past 12 months. Bring this to the respondent's attention as often as you feel it necessary.

NOTE: In item V, do not consider other circulatory conditions reported earlier, as 32 conditions unless they are reported while asking question list 5. For example, "pericarditis" reported in question 28, is not considered a 32 condition unless reported while asking this list.

<p>6</p> <p>32a. DURING THE PAST 12 MONTHS, did anyone in the family (you, your --, etc.) have -</p> <p>If "Yes," ask 32b and c.</p> <p>b. Who was this? - Enter name of condition and letter of line where reported in appropriate person's column in item C.</p> <p>c. During the past 12 months did anyone else have . . . ?</p> <p>Conditions affecting the respiratory system.</p>	<p>A. Bronchitis?</p>	<p>F. Sinus trouble?</p>
	<p>B. Bronchiectasis? (brong ko-ek tek-sis)</p>	<p>G. Deflected or deviated nasal septum?</p>
	<p>C. Asthma?</p>	<p>H. "Tonsillitis or enlargement of the tonsils or adenoids?"</p>
	<p>D. Hay fever?</p>	<p>I. "Laryngitis?"</p>
	<p>E. Nasal polyp?</p>	
	<p>*If reported in question 32 only, ask:</p> <p>1. How many times did -- have . . . in the past 12 months? - If 2+ enter in item C.</p> <p>If only 1 time, ask:</p> <p>2. How long did it last? - If 1 month or longer, enter in item C. If less than 1 month, do not record.</p> <p>If tonsils or adenoids removed during the past 12 months, enter condition causing removal in item C.</p> <p>Make no entry in item C for cold; flu; red, sore, or strep throat; or "virus" reported in answer to question 32.</p>	
<p>6</p> <p>32a. DURING THE PAST 12 MONTHS, did anyone in the family have -</p> <p>If "Yes," ask 32b and c.</p> <p>b. Who was this? Enter in item C.</p> <p>c. During the past 12 months, did anyone else have . . . ?</p> <p>Make no entry in item C for cold; flu; red, sore, or strep throat; or "virus" reported in answer to question 32.</p> <p>Conditions affecting the respiratory system.</p>	<p>J. Tumor, cyst, or growth of the bronchial tube or lung?</p>	<p>O. Tumor, cyst, or growth of the throat, larynx, or trachea?</p>
	<p>K. Emphysema?</p>	<p>P. Any work-related respiratory condition such as dust on the lungs, silicosis or pneu-mo-co-ni-o-sis?</p>
	<p>L. Pleurisy?</p>	<p>Q. During the past 12 months did anyone in the family have any other respiratory, lung, or pulmonary condition? If "Yes," ask: Who was this? - What was the condition? (Enter in item C)</p>
	<p>M. Tuberculosis?</p>	
	<p>N. Abscess of the lung?</p>	

F List 6 is made up of respiratory conditions. The reference period for this list is the PAST 12 MONTHS.

- As noted at the bottom of the list, you are not to consider cold; flu; red, sore, or strep throat as question 32 conditions whether they are reported prior to or during the asking of list 6.

Also do not consider "virus," or a combination of virus and one of the other excluded conditions, for example, "virus cold;" "virus flu;" "virus, red, sore or strep throat." However, "virus" combined with any other condition, for example, "virus pneumonia" DOES require an entry in C2.

32 Condition list (continued)

32

6

6

- 2 Letters H and I in this list are marked with an asterisk; (*) tonsillitis or enlargement of the tonsils or adenoids, and laryngitis. If you receive a "yes" to one of them, ask 32b to determine who had the condition, and look at item C2 for this person. If the condition has not already been recorded in C2, ask questions 1 and 2 below list 6 to determine whether or not to make an entry in item C2.

These questions are designed to screen out single, brief episodes of tonsillitis or enlarged tonsils or adenoids, or laryngitis. You will record these conditions in item C2 from question 32 only if there was more than one episode in the past year, or if a single episode lasted one month or longer.

- a Ask question 1, "How many times did you have tonsillitis in the past 12 months?" If the person had the condition more than once in the past 12 months, record the condition and letter in C2. If the person had the condition only one time during the past 12 months, ask question 2, "How long did it last?" If it lasted one month or longer, record the condition and letter in item C2. If the condition lasted less than one month, do not record it.
- b If a person tells you his tonsils or adenoids were removed during the past 12 months, probe to determine the condition causing the operation and enter the condition, tonsillitis, etc. in C2 without asking the screen question or regardless of the answer(s) to the screen questions if they've already been asked. Even if the condition requiring the surgery is one of the excluded conditions, such as "strep throat," you should enter it in C2.

After asking the screen questions for this person, ask 32c and follow the same procedure for questions 1 and 2 for the next person reporting the asterisked condition.

- c If any of the asterisked conditions were reported before question 32, do not ask the screen questions. Treat these as other conditions reported prior to the asking of question 32 and enter the letter, H or I, next to the condition in C2.
- d If "enlargement of the tonsils and adenoids" is reported, enter this on one line in C2 and fill only one Condition page.

G In summary, consider as question 32 conditions:

- a Any condition reported while asking question 32, if present during the reference period, except flu, grippe, or cold for list 1; and cold; flu; red, sore, strep throat, or virus when asking list 6.
- b Any condition reported prior to asking question 32 if it mentions a specific part of the body that is in italics in the list you are asking. For example, if list 1 were asked, include infected gallbladder if list 3 were asked, include overactive thyroid as 32 conditions.

32 Condition list (continued)

32

c Any condition reported prior to asking question 32 if it is specifically in the list you are asking about. For example, gallstones in list 1 or cataracts in list 4.

Do NOT consider as question 32 conditions:

- a Any condition reported while asking question 32 if not present during the reference period for your list.
- b Any condition reported prior to asking question 32 if it is not specifically in your list, does not contain an italicized part of body, and is not reported again in the list of question 32 you are asking.

Question 33, General Health Question

33

33

33. Compared to other persons --'s age, would you say that his health is excellent, good, fair, or poor?	33. 1 E 2 G 3 F 4 P
--	---------------------

Question 33 is a general health question to determine the respondent's own evaluation of each member of the family's health as compared to other persons of the same age. If the respondent does not understand, reask the question emphasizing the phrase, "Compared to other persons --'s age." Circle the appropriate response according to the respondent's reply.

Item BD, Question 34, 12 mo. Bed Days

BD

34

BD

34

BD	Mark box(es) from item C.	BD	<input type="checkbox"/> 1 - Bed Days <input type="checkbox"/> 2 - Hospital Stays <input type="checkbox"/> 3 - No Bed Days
34.	During the past 12 months (that is since _____ (date) _____ a year ago), ABOUT how many days did illness or injury keep -- in bed all or most of the day? (Include the days in the past 2 weeks.) (Include the days while a patient in a hospital.) (Was it more than 7 days or less than 7 days?) (Was it more than 30 days or less than 30 days?) (Was it more than half the year or less than half the year?)	34.	<input type="checkbox"/> 0 - None <input type="checkbox"/> 1 - 7 <input type="checkbox"/> 2 - 8-30 <input type="checkbox"/> 3 - 31-180 (6 months) <input type="checkbox"/> 4 - 181+ (6 months +)

1 Complete item BD from the entries in C1. The box(es) marked in BD indicate which parenthetical phrase(s) to use when asking question 34. If no bed days and no hospitalizations are indicated in C1, mark "No bed days" and ask question 34 without the parenthetical phrases at the end of the question. If either bed days or hospitalizations, but not both, are indicated in C1, mark the appropriate box in item BD and ask question 34 using the appropriate parenthetical statement. If both bed days and hospitalizations are indicated, mark both boxes in BD and ask question 34 using both parenthetical statements.

34 12 Month Bed Days (continued)

34

- 2 In asking question 34, use the reference date entered in C2 for "12-month Bed Days and Doctor visit probe" for the first person in the household and repeat it as often as you feel it is necessary.
- 3 Ask question 34 to obtain an estimate of the total number of bed days due to all illnesses or injuries during the past year. If the respondent is uncertain of the number of days, ask--"Was it more than 7 days or less than 7 days?" Ask the additional probe questions as necessary in order to mark the appropriate box.

R

Item R, Respondent

R

R Q's 4-34	<p>For persons 17 years or over, show who responded for (or was present during the asking of) Questions 4-34</p> <p>If persons responded for self, show whether entirely or partly. For persons under 17 show who responded for them.</p>	R	<p>1 <input type="checkbox"/> Responded for self-entirely</p> <p>2 <input type="checkbox"/> Responded for self-partly</p> <p>Person _____ was respondent</p>
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Item R, Who Responded - Item R is used to identify the respondent for probe questions 4-34. Mark item R as follows:

- 1 Adult - For persons who responded to questions 4-34 entirely for themselves, mark the box "Responded for self-entirely." Consider persons to have responded "self-entirely" if they were present (in the same room or within hearing distance) during the asking of all of questions 4-34, even if they did not answer any questions directly.
 - a For persons who responded partly for themselves, mark the box "Responded for self-partly" and enter the column number of the other person(s) who partly responded. Consider persons to have responded "self-partly" if they were present (in the same room or within hearing distance) during the asking of at least one, but not all of questions 4-34.
 - b For adults not present, enter the column number of the person or persons who responded for them.
- 2 Children - For unmarried persons under 17, enter in item R the column number of all persons who responded for them or were present during the asking of these questions.
- 3 Interpreter - When an interpreter is involved, consider the person(s) providing the information to the interpreter as the respondent.

CHAPTER 4. CONDITION PAGE

A General Procedure

Ask the questions on the Condition page separately for each condition recorded in item C2.

If a condition requiring a Condition page is first reported after you have completed the Probe pages, enter it in item C2 at the time it is reported. Fill a Condition page for this new condition after you have completed the entire page on which it was reported, for example, after completing all required columns for doctor visits or hospitalizations, unless it is reported on a Condition page. In this case, fill a Condition page for it before completing any other Condition pages.

B Order of Filling Condition Pages

Complete the Condition pages in the order they are listed in item C. Fill the first Condition page for the first condition listed for Person ①. Continue consecutively, condition by condition, until each condition recorded in item C2 for Person ① has been carried through a separate Condition page. Continue by carrying all of Person ②'s conditions listed through separate Condition pages, then Person ③, etc.

Enter in the box to the right of the condition in item C2, each condition number, which appears in the upper left-hand corner of the Condition page. Do this when the condition is carried from item C2 to the Condition page.

C Extra Questionnaire Needed for More Than Six Conditions

If there are more than six conditions reported, use extra questionnaires and number the Condition pages consecutively. Thus, for more than six conditions, you must change the number of the first Condition page in the second questionnaire to seven.

D Types of Reporting Problems

1 Dental Conditions - If teeth were pulled or other dental surgery performed, record in question 3 the name of the disease or condition that necessitated the pulling of the teeth or surgery.

2 Pregnancy and Delivery

Record the complication(s) of pregnancy (such as morning sickness or hypertension) or delivery (such as phlebitis or anemia) in question 3a. Complete questions 3b through 3e according to the rules for each part. For delivery, and delivery complications, mark the date of onset according to the date of delivery.

- 3 Mental Illness - If mental illness is reported by the respondent, try to get the medical name and record it in question 3a. If the medical name is not known, enter a description of how it affects the person.
- 4 Operations - If the only description the respondent gives of an illness is the name of an operation, ask what the condition was that made the operation necessary and record that condition in question 3b. Also, record any present ill-effects mentioned. "Vasectomy" is on Card C and is an exception to this rule.
- 5 Refused - If the name of the condition has previously been refused, enter "Refused" in item 1 and complete this Condition page with as much information as you can obtain.
- 6 Reaction to Drugs - If the respondent reports a reaction to drugs taken causing illness with restricted activity or medical attention in the past two weeks, three things should be recorded in 3a: The reaction, the drug, and the reason for taking the drug. For example, "skin rash - penicillin - virus." (See page D4-14, par. 4.)
- 7 Caution About Deciding Two Conditions Are the Same - Do not attempt to "diagnose" conditions which appear to be the same or to make decisions that the two conditions are the same because they seem to be alike, for example, "deformed foot" and "club foot."
 - a Do not probe to determine whether two conditions are the same. It is only when the respondent indicates they are the same by the answers to the questions or when the names of conditions are identical, that you are to consider the two conditions as the same. Otherwise, record them separately in item C2 and carry each condition through a separate Condition page.
 - b If the names of the conditions are identical or if the respondent actually says that one condition is the same as another for which you have already completed a Condition page, follow this procedure:
 - 1) Leave the separate entries for each condition reported, but enter a footnote on the two Condition pages that the conditions are the same. Refer to the conditions by number, for example, for the first condition you would have "Same as cond. 2" and for the second "Same as cond. 1."

- 2) Since you will already have taken the first condition through all questions of a Condition page, you will usually not need to ask the remaining questions for any other condition which has been reported as being the same as the first one.

NOTE: Conditions listed or reported in question 32 require certain additional information. That is, questions 11-16 are required for conditions from 32, but are not required for conditions reported elsewhere. When you are asking about a condition listed or reported in question 32 and the respondent says that it is the same as a condition for which you have already completed a Condition page, be sure that on one of the pages you have asked all the questions appropriate for these conditions. For example, you have in item C2:

Question number 25 - Pain in back

Question number Q - Curvature of spine

When filling the Condition page for "Curvature of spine," the respondent says the two conditions are the same. When you are told these are the same, skip to item AA and questions 11-16 on this page before footnoting "Same as condition 1." The reason for this is that these questions are not required for "Pain in back" but are required for "Curvature of spine" because it is a question 32 condition.

However, if the conditions had been reversed, that is, the "Curvature of spine" first, and the "Pain in back" next, and the respondent says they are the same, then you would need no more information on the page for "Pain in back" except the footnote that these conditions are the same.

E Questions 3a-e, Condition Details

For purposes of analysis, all illnesses and injuries reported must be translated into medical codes. Since the coding system in use provides for over 1,500 different conditions, it is desirable that the description of the conditions be as complete and detailed as possible. Questions 3a-e are designed to obtain this needed information.

- 1 The best description of a condition is its exact medical title. Sometimes the statements of respondents do not always give a complete description of the condition. When the respondent does not know the exact medical title of the illness, one or more of three different kinds of information generally needs to be obtained in order to assign the most exact medical code:
 - a The respondent's statement of the cause.
 - b A specific description of the kind of trouble.
 - c The part of the body affected.
- 2 Ask questions 3b-3e about the entries in question 3, not the entry in item 1.
- 3 IF ANY NEEDED ENTRIES FOR 3b-3e HAVE BEEN RECORDED PREVIOUSLY IN QUESTION 3, IT IS NOT NECESSARY TO REASK THE QUESTION OR REENTER THE ANSWER.

F When to Complete Separate Condition Pages

- 1 Complete separate Condition pages when question 3a contains more than one condition. For example:

Question 28 and item 1 - Pain in stomach

Question 3a - Bladder and Kidney Infection

Carry the first condition, "Bladder infection," through the remainder of this Condition page. Enter the second condition, "Kidney infection," in item C2 with "Cond." as the source, at the time it is reported so that a page will be filled for it before any other Condition pages are filled.

However, do not complete separate Condition pages for "enlargement of tonsils and adenoids." This is the only exception to the rule.

- 2 Separate Condition pages are also required for each present effect reported for a condition the person no longer has. For example:

a Item 1 - Stroke

Question 3a - Stroke

Question 3b - High blood pressure

Question 3d - One entire leg stiff and one short arm

Carry the first condition, "Stiff leg," through the remainder of this Condition page. Enter the second condition, "One short arm" in C2 with "Cond." as the source and fill a Condition page for it before filling any other Condition pages.

b Item 1 - Paralysis

Question 3a - Paralysis

Question 3b - Polio

Question 3e - All of right arm and one drop foot

Carry the first condition, "Paralysis of the right arm," through the remainder of this Condition page. Enter the second condition, "Drop foot" in C2 with "Cond." as the source and fill a Condition page for it before filling any other Condition pages.

- 3 Complete separate condition pages for each present effect of the same accident reported in 18b. For example:

Item 1 - Arm injury

18b - One entire arm shriveled
One lower arm painful

In this case, enter "one lower arm painful" in C2 with "Cond." as the source, assuming the arm injury is the same as the first present effect reported, "one entire arm shriveled."

See also section H for separate Condition pages due to an accident or injury.

G Questions 4-8, Restricted Activity Past Two Weeks

The purpose of these questions is to separate the conditions causing persons to cut down on their usual activities for as much as a day, from those conditions not affecting usual activities. Ask questions 4-8 for each condition marked in item A2 without regard to the answers to probe questions 5-9 on pages 2 and 3.

- 1 Refer the respondent to the calendar card for questions 4-8 as often as necessary, since these questions refer to the past two weeks.
- 2 For injuries occurring less than three months ago, questions 4-8 refer to the injury itself and/or any ill-effects which were present during "the past two weeks." For injuries occurring more than three months ago, questions 4-8 refer to the present effects.
- 3 In Bed or in a Hospital - If a person is sick in bed or in the hospital (because of the condition you are asking about), consider this as cutting down on usual activities. This includes a chronic invalid who stays in bed all the time because of the condition you are asking about.
- 4 Check for Number of Days Reported in Questions 7 and 8 - Since hardly anyone works seven days a week or goes to school seven days a week, follow up replies of "the whole two weeks," "all last week," etc. Do not enter "14" or "7" automatically but reask the question in order to find out the actual number of days lost from work or school. If a person actually lost 14 days from work or school during "the past two weeks," enter "14" but explain in a footnote that these days were actually lost.
- 5 Check Between Questions 5, 6, 7, and 8 - The number of days entered in question 5 (cut-down days) must be equal to or greater than the number of days entered in any one of questions 6, 7, or 8, since days in bed or days lost from school or work represent "cutting down on usual activities." If there are inconsistencies of this kind, ask additional questions to ascertain the correct number to be recorded.
- 6 Differences Between Restricted Activity Days in Probe Questions 5-9 and on the Condition Page - It is possible that the total number of days reported for all conditions will be greater than the number of days reported in probe questions 5-9 on pages 2 and 3, since the person on any given day can cut down or be in bed for more than one condition. Such entries may or may not be consistent. Therefore, do not compare the entries in probe questions 5-9 on pages 2 and 3 and the entries in questions 4-8 on the Condition page. Accept what the respondent reports.

H Questions 17-21, Accidents and Injuries

These questions obtain information about ALL accidents or injuries which are recorded on a Condition page.

- 1 Record multiple injuries, resulting from the same accident, together in the same set of accident questions on a single Condition page if the accident occurred during the past three months.

- 2 Each separate accident requires a separate Condition page unless the same condition was caused by more than one accident, all of which occurred three months or more ago. In this case, fill the accident questions for the most recent accident and give the date(s) (month and year) of the other accident(s) in a footnote.
- 3 If a condition is caused by an accident that happened more than three months ago, and a later accident (less than three months ago) aggravated this condition, an additional Condition page is required. One Condition page will pertain to the earlier accident and the other to the one that happened less than three months ago. Enter the other injury in item C2 so that there are entries in C2 to correspond to the two Condition pages.
- 4 If two or more present effects reported in 18b are the results of the same accident, each requires a separate Condition page. In these cases, footnote "Same accident as condition _____," in questions 17-21. Fill a Condition page for each present effect in the same order as they are listed in question 18b. When such additional conditions requiring Condition pages are reported, enter them in item C2 at the time they are reported.

①

Item 1, Person Number and Name of Condition

①

1. Person number	Name of condition
------------------	-------------------

Transcribe the entries for item 1 to the Condition page before you ask question 2.

- 1 Person Number - Write in the number of the person who has the condition for which this particular Condition page is being filled.
- 2 Name of Condition - Transcribe the "Name of condition" verbatim as entered in item C2.

2

Question 2. When Last Saw or Talked to Doctor

2

2. When did -- last see or talk to a doctor about his ...?		
1 <input type="checkbox"/> In interview meet (Recst 2)	2 <input type="checkbox"/> Past 2 wks. (Item C) 2 wks.-6 mos. Over 6-12 mos. 1 yr.	3 <input type="checkbox"/> 2-4 yrs. 4 <input type="checkbox"/> 5 yrs. 5 <input type="checkbox"/> Never 6 <input type="checkbox"/> DK if Dr. seen 7 <input type="checkbox"/> DK when Dr. seen

1 Ask question 2 for each condition entered in item 1. In asking the question, substitute the name or relationship of the person for the dashes, and the name of the condition for the three dots.

a Doctor Seen or Talked To

This person saw or talked to a doctor if there was:

- 1) A visit by the person to the doctor, visits to a doctor's office, a clinic, a medical center or a hospital (either as an inpatient or an outpatient) where a person goes for treatment or examination but where a doctor may not actually be seen or talked to.
- 2) A visit by the doctor to the person. If the doctor visits the household to see one patient and while there examines or visits professionally another member of the household, count this visit as "doctor seen or talked to" for each individual for each condition receiving the doctor's attention. However, do not count visits by visiting nurses or physical therapists to the home unless accompanied by a doctor.
- 3) Telephone calls to or from a doctor (except requests for appointments or inquiries about a bill), including calls concerning the obtaining or renewal of a prescription.
- 4) The case in which the person who had the condition is a doctor and followed his/her own treatment or advice.
- 5) Talking on an informal basis to a family member or friend who is a doctor to obtain medical advice.

b Type of Doctor

- 1) The term "doctor" includes only medical doctors (MD) and osteopathic physicians (DO). Include all visits to medical doctors regardless of whether they are general practitioners or specialists. Ophthalmologists (occulists) have an MD degree and are counted as medical specialists. Also, include dentists (for dental conditions).

(2) When Last Saw or Talked to Doctor (Continued)

(2)

- 2) Consulting chiropractors, chiropodists, podiatrists, naturopaths, Christian Science healers, opticians, optometrists or other types of people giving medical care are not counted.
- 3) Do not make a special inquiry about the kind of doctor consulted or tell the respondent the survey definition of who is considered a doctor. If the respondent volunteers a chiropractor was seen, rephrase the question and ask "When did you last see or talk to a medical doctor?"
- 2 For conditions which usually last a long time, such as heart trouble, high blood pressure, hay fever, arteriosclerosis, arthritis, etc., a person might not consult a doctor every time an occurrence (attack) of the trouble is experienced. Question 2 refers to the last time a doctor was seen or talked to for that condition since it first started.
- 3 For conditions which usually last a short time, and which a person may have repeatedly, such as colds, virus, flu, injuries occurring less than three months ago (that did not result in obvious permanent disability), etc., question 2 refers to the last time a doctor was talked to about this particular episode. Question 2 does not refer to the times a doctor was talked to about previous attacks of colds, virus or other similar short-term conditions.
- 4 Mark the answer box for question 2 of each Condition page as follows:

In Interview Week - The respondent reports seeing a doctor during interview week. Rephrase question 2 to determine when a doctor was last seen at any time other than interview week for this condition. Do not change the original entry but mark the appropriate box for the new response. Thus, if "In interview week" is marked, you will also have another answer box marked. As a result of this "Never" may be marked, meaning a doctor was never seen before interview week.

Past 2 wks. - The respondent reports seeing a doctor during the two-week reference period. Look at the "DV" box in item C1 to determine if any doctor visits were reported for this person. If no doctor visits are recorded, enter "1" for this person in item C1. If there are doctor visits recorded, make no correction in C1. If you learn the visit was to a dentist, or while the person was an inpatient in the hospital, enter a footnote to this effect, but do not make any entry in C1.

2 wks.—6 mos. - The person's last doctor visit was before the two-week reference period but within the six-month period.

Over 6—12 mos. - The person's last doctor visit was between six and 12 months ago.

② When Last Saw or Talked to Doctor (Continued)

②

1 yr. - The person's last doctor visit was 12 or more months ago but less than two years ago.

2-4 years - The person's last doctor visit was two or more years ago but less than five years ago.

5+ years - The person's last doctor visit was five or more years ago.

Never - The respondent reports never having seen a doctor prior to interview week or reports seeing someone not counted as a medical doctor.

DK if Dr. seen - The respondent does not know if a doctor was ever seen for this condition.

DK when Dr. seen - The respondent cannot give an estimate as to when a doctor was seen for this condition.

(A1)

Interviewer Check Item A1

(A1)

A1	Examine "Name of condition" entry and mark	
	<input type="checkbox"/> Color blindness (NC)	<input type="checkbox"/> On Card C (A2)
	<input type="checkbox"/> Accident or injury (A2)	<input type="checkbox"/> Neither (3a)

- 1 Fill interviewer check item A1 immediately after recording the answer to question 2. Examine the "Name of condition" entry in item 1, then mark one of the four boxes.
- 2 "Color Blindness" - If the "Name of condition" entry in item 1 is color blindness, mark this box and go to the next condition.
- 3 "Accident or Injury" - If the "Name of condition" entry in item 1 or the respondent indicates that an accident or injury was involved, mark this box and go to item A2.
 - a Accidents and Injuries - Accidents may occur with or without a resulting injury. For purposes of this survey, we are not interested in accidents in which there was no injury involved, unless reported in probe question 11.
 - 1) Difference Between "Accidents" and "Injuries" - The terms "accident" and "injury" may be used interchangeably. There are cases, however, when an injury may occur when an accident is not involved, for example, a war injury, a shooting, a stabbing, etc.
 - 2) Injuries - There are many kinds of injuries, such as cuts, bruises, burns, sprains, fractures, etc. "Insect stings," "animal bites", "heat or sunstrokes," "blisters," "frostbite," "frozen feet," etc., are also considered as injuries.
 - 3) Poisonings - Illnesses resulting from swallowing, drinking, breathing or coming in contact with some poisonous substance or gas are also counted as injuries. Poisoning may also occur from an overdose of substance that is nonpoisonous when taken in normal doses.

Exclude conditions which are diseases or illnesses not classified as injuries, for example, "poison oak," "poison ivy," "ptomaine or food poisoning."

NOTE: Also mark this box if this page was completed because of multiple present effects of an old accident or injury in question 18b on a previous Condition page.

- b Caution Regarding Accidents and Injuries
 - 1) Do not mark the "Accident or injury" box for birth injuries to either the mother or the child. However, make sure that the injury occurred during the act of delivery, not later. For injuries occurring after birth, do mark this box.

(A1)

Interviewer Check Item A1 (Continued)

(A1)

- 2) A condition, such as "broken (perforated) (ruptured) eardrum" may be caused by an accident or injury or may be due to some other cause, such as childhood disease. Always ask what caused the broken eardrum or other such conditions.
 - 3) If the respondent does not know whether a condition was caused by an accident or injury, or cannot recall such an occurrence when an accident is indicated, do not mark this box. Explain the circumstances in a footnote, such as "Doctor says blow on head but respondent cannot recall."
 - 4) Exposure to heavy lifting, loud noise, and other similar hazards are considered injuries only when they are one-time occurrences. For example, a punctured eardrum resulting from a loud explosion would be considered an injury, but continued exposure to loud noises at work resulting in partial deafness would not be considered an injury. For the latter case, do not mark this box, but indicate that the condition was caused by continued exposure to loud noises at work. Follow the same procedure if the cause is continued heavy lifting, continued strain, etc.
- 4 "On Card C" - If the condition is not an injury and was not obviously caused by an accident, refer to Card C of the flashcard booklet to see if the condition is listed there. If it is listed, mark this box and go to item A2.
- a Names of illnesses given by respondents are often sufficient to permit medical coding without further probing. This is true of the specified conditions listed on Card C and so it is not necessary to ask questions 3a-e for these conditions. However, Card C is an exclusive list. Do not apply the Card C rule to conditions which you feel are synonyms of the listed conditions.

For example, "hernia (any type)" is on Card C, while "rupture" is not; mark the "Neither" box and ask questions 3a-e, as applicable, for "rupture" but mark the "On Card C" box for "hernia." "Stomach ulcer," "duodenal ulcer," "gastric ulcer," and "peptic ulcer" are on Card C while "ulcer(s)" (unspecified) is not. If you are in doubt, consider the condition not to be on Card C.
 - b If the condition is "trouble with" a specific condition on Card C such as corns, mark the "Card C" box.
 - c If the respondent volunteers the information that a Card C condition was caused by an accident, for example, bursitis caused by an accident, mark the "Accident or injury" box.
- 5 "Neither" - If the "Name of condition" entry in item 1 is not color blindness, is not an accident or injury, and is not on Card C, mark this box and go to question 3a.

3a

Question 3a, Name of Condition

3a

If "Doctor not talked to," transcribe entry from item 1.
If "Doctor talked to," ask:
3a. What did the doctor say it was? - Did he give it a medical name?

- 1 Ask question 3a when a doctor has been talked to about an illness, even if the only time a doctor was seen was during interview week and the "Never" box is marked in question 2. Also, ask question 3a if question 2 is marked "Never" but the person reported seeing a non-medical doctor, such as a chiropractor. If a doctor was not talked to about an illness condition, transcribe the item 1 entry to 3a without asking the question.

- 2 Enter whatever the respondent tells you the doctor said, using the respondent's own words. If the medical name given by the respondent is one which is unfamiliar to you, ask the person to spell it. If the exact spelling is not known, record it phonetically but also ask the respondent to describe how it affects him/her and record a description of the condition. In all cases, remember that the entry in question 3a should be exact and as complete as possible. Therefore, if the respondent does not know the "medical name" or if the answer is vague, for example, "It's my liver," "I've got a bad heart," "Something I ate," "Some kind of ailment," do not accept it. Instead, ask the person to describe the condition further, for example, "What's wrong with your liver?", "In what way is your heart bad?", "How does this food affect you?", "What kind of ailment do you have?"
 - a It is permissible to copy the "Name of condition" entry to question 3a if that entry is clearer and more complete than the respondent's final answer to question 3a or he says he does not know what the doctor said it was.
 - b Question 3a should never be left blank or have an entry of "DK" when the "Neither" box has been marked in item A1.

3b

Question 3b. Cause of Condition

3b

Do not ask for Cancer	<input type="checkbox"/> On Card C (A2)
b. What was the cause of . . . ?	
--- Accident or injury (A2)	

- 1 Mark the "On Card C" box if the answer to question 3a is a condition on Card C. For example, if the response to 3a is "Stomach ulcer," enter this in 3a and mark the "On Card C" box in 3b. However, do not mark this box if a Card C condition is given in response to 3b-3d. Complete the remaining parts of question 3 according to the instructions for each part.
- 2 Ask question 3b for all other conditions except cancer. Enter the respondent's answer verbatim.
- 3 If cause is reported in answer to question 3a, enter the cause in question 3b without asking the question. For example, record a reply of "Overwork caused a strain on my heart," as "Strained heart" in 3a, "Overwork" in 3b.
- 4 If the answer to 3b is an accident or injury, mark this box and go to A2. No written entry is required.

NOTE: Reactions to drugs - Illnesses or reactions resulting from absorption, swallowing, breathing, or injections of drugs are considered as injuries.

(3c)

Question 3c, Kind of Trouble

(3c)

If the entry in 3a or 3b includes the words:			
Ailment	Condition	Disorder	Trouble
Anemia	Cyst	Growth	Tumor
Asthma	Defect	Measles	Ulcer
Attack	Disease	Rupture	
} Ask c:			
c. What kind of . . . is it?			

- 1 Ask question 3c if any of the terms listed above this question appear in 3a or b and the required information has not been given previously. If the first answer indicates that the respondent does not understand what information is desired, reask question 3c, emphasizing the word "kind." If the respondent does not know the specific kind, record what is said about it or enter "DK." Do not repeat the entry that was recorded in 3a or b, such as "heart trouble," or "nervous condition," but ask "What kind of heart trouble," "What kind of nervous condition" is it?"
- 2 It is not always clear from the entries in question 3a or 3b the exact kind of condition the person has. For example, "heart trouble," "kidney trouble" and "stomach disorder" are all general terms which give a specific part or organ of the body but not a specific kind of illness or trouble. Thus, heart trouble might be of several different kinds--angina, coronary, rheumatic, leakage, etc.; kidney trouble could mean kidney stones, nephritis, bladder infection, etc.; stomach trouble could refer to any number of digestive disturbances, such as ulcers, appendicitis, intestinal flu, etc. In question 3c, we ask the respondent to provide more specific information if it is known.
- 3 One of the terms listed for which 3c (kind) is asked is "measles." This is necessary in order to distinguish between rubeola (regular measles) and rubella (German measles). The following terms are considered adequate to make this distinction:

Regular measles

Rubeola

"8 day" measles

"Old fashioned" measles

"Black" measles

"Hard" measles

"Bad" measles

"Red" measles

German measles

Rubella

"3 day" measles

3c

Kind of Trouble (Continued)

3c

If "measles" is given as the cause of a condition, for example, deafness due to measles, and the respondent does not know the kind, ask additional questions to determine if the measles were present during the mother's pregnancy, or if the person who has the condition is the one who had the measles.

- 4 For "cyst," "tumor," or other "growths," we want to determine the kind of cyst, etc. For example, was it cancerous (malignant), noncancerous (benign), sebaceous, neoplastic, etc. However, do not specifically ask if it was cancerous or noncancerous. For example, for "ovarian cyst" ask: "What kind of ovarian cyst is it?" (or "was it?" if the cyst has been removed). Also, ask kind for such entries as "skin growth," "flesh tumor" and "bone cyst" which describe only the site or part of body.

NOTE: If a specific name is given in 3a or 3b with one of the terms above 3c, such as sebaceous cyst, pernicious anemia, Meniere's disease, bronchial asthma, do not ask 3c. However, if a part of body is given, such as heart disease or cardiac condition, ask 3c.

3d

Question 3d, How Allergy or Stroke Affects Person

3d

For allergy or stroke, ask:
d. How does the allergy (stroke) affect him?

- 1 When "allergy" or "stroke" has been reported in question 3a, 3b, or 3c, ask question 3d inserting the appropriate word for the condition about which you are asking:

"How does the allergy affect him?"

or

"How does the stroke affect him?"

If the effect of the "allergy" or "stroke" has already been given in questions 3a-3c, question 3d need not be asked.

- 2 Enter the manifestations. For example, in the case of an allergy the person may have been affected with a swelling in some part of the body, a breaking out or itching, sneezing, eyes watering, nasal trouble, difficulty breathing, etc.
- 3 For a stroke, the manifestation might be "nervous tic on left side of face," "entire right leg and arm paralyzed," "speech difficulty," etc. Note that for a stroke, the information needed is how the person is affected now, not necessarily the effects at the time of the stroke. An entry giving only the part of body affected, for example, left side, is inadequate since we need to know how the person is affected.

3e

Question 3e. Part of Body Affected

3e

If in 3a-d there is an impairment or any of the following entries:

Abscess	Damage	Paralysis	} Asc c:
Ache (except head or ear)	Growth	Rupture	
Bleeding	Hemorrhage	Sore	
Blood clot	Infection	Soreness	
Boil	Inflammation	Tumor	
Cancer	Neuralgia	Ulcer	
Corns (except monstrous)	Neuritis	Varicose veins	
Cyst	Pain	Weak	
	Palsy	Weakness	

a. What part of the body is affected?

Show the following detail.

Head	skull, scalp, face
Back spine vertebrae	upper, middle, lower
Ear or eye	one or both
Arm	one or both, shoulder, upper, elbow, lower, wrist, hand
Leg	one or both, hip, upper, knee, lower, ankle, foot

1 Ask question 3e when any entry in questions 3a-d indicates either an impairment listed in paragraph 2 below, or is one of the conditions listed above this question. Phrase the question to obtain the needed information, for example, "Does your deafness affect one or both ears?" or "What part of the back is affected?"

2 Impairments for which question 3e must be asked:

Deafness, trouble hearing, or any other ear condition.

Blindness, trouble seeing, or any other eye condition.

Missing hand or arm - all or part of, foot or leg - all or part of.

Trouble, stiffness or any deformity of foot, leg, fingers, arm or back. "Deformity" includes the terms contracture, curvature, atrophy, accessory or extra, short or shortness, crippled, shriveled, drawn up, twisted, withered, and scarred or scarring involving the leg, arm, or back.

3 For the impairments listed in paragraph 2 and conditions listed above question 3e which affect the "eye," "head," "back," "spine," "vertebra," "arm," or "leg," question 3 must show the specific detail that is required as given below question 3e.

a There are other detailed entries besides those listed which are acceptable, for example, "finger," "toe," "arch," "neck," etc. If an entire arm or leg is affected, state that this is so by entries, such as "one entire arm" or "one whole leg;" do not simply enter "arm" or "leg" only.

b If the part of the body affected is the eye or ear, or any part of the arm or leg, ask whether one or both are affected.

(A2)

Interviewer Check Item A2

(A2)

A2	Ask remaining questions as appropriate for the condition entered in:		
	<input type="checkbox"/> Item 1	<input type="checkbox"/> Q. 3b	<input type="checkbox"/> Q. 3d
	<input type="checkbox"/> Q. 3a	<input type="checkbox"/> Q. 3c	<input type="checkbox"/> Q. 3e

The purpose of item A2 is to indicate for which condition questions 4-16 should be asked. Mark one box in item A2 in the following order of preference.

- 1 If you marked "Accident or injury" or "On Card C" in item A1, mark the "Item 1" box.
- 2 For old conditions which the person no longer has, mark the box in A2 to indicate where the present effects were first reported on this Condition page. For example:

Question G and item 1 - Paralysis
Question 3a - Stroke
Question 3b - Hardening of the arteries
Question 3d - Paralysis of entire left arm

Mark the
"Item 1"
box

Question 28 and item 1 - Foot trouble
Question 3a - Club foot corrected as a child
Question 3b - Birth injury

Mark the
"Item 1"
box

or

Question G and item 1 - Stroke
Question 3a - Stroke
Question 3b - High blood pressure
Question 3d - Lips

Mark the
"Q. 3d"
box

or

Item 1 - Infantile paralysis
Question 3a - Infantile paralysis
Question 3b - Polio
Question 3e - Paralysis of all of right arm
and one drop foot

Mark the
"Q. 3e."
box

(A2)

Interview Check Item (Continued)

(A2)

However, do not probe to determine if a condition is the present effect of an old one. If it is not clear from what the respondent says that a condition in item 1 or any part of question 3 is old and no longer present, mark A2 according to the rules in paragraphs 3 and 4.

- 3 If the condition in item 1 has a letter as its source, and there are no present effects of an old condition, mark the item 1 box. For example:

Question U and item 1 - bow legs	Mark the
Question 3a - Rickets	"Item 1"
Question 3b - Diet deficiency	box

or

Question B and item 1 - infected gallbladder	Mark the
Question 3a - Gallstones	"Item 1"
Question 3b - DK	box

- 4 In all other cases, mark the "Q. 3a" box in A2. For example:

Question 17 and item 1 - Allergy	Mark the
Question 3a - Allergy	"Q. 3a"
Question 3b - Dust	box
Question 3d - Constant wheezing	

or

Question 28 and item 1 - Stammering	Mark the
Question 3a - Slow learner	"Q. 3a"
Question 3b - Premature birth	box

④

Question 4, Restricted Activity, Past Two Weeks

④

4. During the past 2 weeks, did his . . . cause him to cut down on the things he usually does?	1 Y	2 N (0)
--	-----	---------

1 In asking question 4, insert the name of the condition or the injury you are asking about. If the name of the condition is too long or difficult to pronounce, you may shorten or refer to it, as for example, your "hip condition" or "your husband's eye injury," etc, but this may be done only if the respondent clearly understands what condition or injury you are talking about.

2 Things He Usually Does - The things a person usually does are the person's "usual activities." For school children and most adults, "usual activities" would be going to school, working, or keeping house, etc. For children under school age, "usual activities" depend upon whatever the usual pattern is for the child which will, in turn, be affected by the age of the child, weather conditions, etc. For retired or elderly persons, "usual activities" might consist of almost no activity, but cutting down on even a small amount would mean that a person should answer "Yes" to the question.

On Sundays or holidays "usual activities" should be interpreted as the things a person usually does on those days, such as going to church, playing golf, visiting friends or relatives, staying at home and listening to the radio, reading, looking at television, etc.

a The following examples illustrate cases of persons "Cutting down" on the things they usually do because of illness or injury; a person in school was kept away from school; a person who worked away from home was kept away from work; a farmer or a housewife was kept from caring for the farm or the home either completely or had to cut out all but the essential chores; an elderly person who normally takes a daily walk in the park was kept from doing so.

b In borderline cases, where "usual activity" is difficult to determine, accept the respondents' view of what is considered to be their "usual activities." For example, a man with a heart condition may still consider his "usual activity" to be "working" even though the heart condition has prevented him from working for a year or more. You should accept his statement that "working" is his "usual activity." In another example, a man may say that a heart attack six months ago forced him to retire from his job or business, he does not expect to return to work, and considers his present "usual activities" to include only those associated with his retirement. The question, then, would refer to those activities.

5

Question 5, Days Cut Down in Past Two Weeks

5

5. During that period how many days did he cut down for as much as a day?	— Days (or — None (0))
---	---------------------------

- 1 Enter the total number of different days during last week and/or the week before on which the condition caused the person to cut down on the things he/she does for as much as a day. The days need not be consecutive.
- 2 Cut Down as Much as a Day - A day of restricted activity (cut down) is a day when a person cuts down on usual activities for that entire day because of illness or injury. "Usual activities" for any day mean the things that the person would usually do on that day.
 - a Restricted activity does not imply complete inactivity but it does imply the minimum of the things a person usually does. A special nap for an hour after lunch does not constitute cutting down on usual activities for as much as a day, nor does the elimination of a heavy chore, such as cleaning ashes out of the furnace or hanging out the wash. All or most of a person's usual activities for the day must have been restricted for the person to have a cut down day.
 - b The following are some examples of a person having to cut down on the things he usually does for as much as a day:

A housewife who expected to clean house after doing the breakfast dishes, then work in the garden and go shopping in the afternoon was forced to rest because of a severe headache, doing nothing after the breakfast dishes until she prepared the evening meal.

A young boy who usually played outside most of the day was confined to the house because of a severe cold.

A garage owner whose usual activities included mechanical and other heavy work was forced to stay in his office directing others, talking to customers, etc., because of his heart condition.
- 3 The reference period for question 5 includes Saturdays and Sundays. ALL the days of the week are of equal importance in this question, even though the types of "cut down" activities might not be the same on weekends as on regular weekdays. If necessary, mention this to the respondent. To illustrate this concept, consider the following example:

A man who planned a fishing trip for Saturday and Sunday had to stay home from work Friday and was also too ill to go fishing both on Saturday and Sunday because of a flare-up of his back trouble. If you find that this was the only time during the past two weeks in which he was bothered by back trouble, the correct entry for question 5 would be "3".

6

Question 6, Bed Days in Past Two Weeks

6

6. During the 2-week period, how many days did
his . . . keep him in bed all or most of the day? _____ Days
(or None)

- 1 Day in Bed - Any day on which the person was kept in bed for all or most of the day because of an illness or injury. All or most of the day is defined as more than half of the daylight hours (or of the hours that the person is usually awake, if he works a night shift). Taking a nap on "general principles" should not be counted as a day in bed. Also, count all days as a patient in a hospital, sanitarium or nursing home for this condition as bed days whether or not the patient was actually lying in bed at the hospital, sanitarium or nursing home. Exclude hospital days for a normal newborn, unless the baby had some complication or illness.
- 2 Bed - Anything used for sleeping, including sofa, cot or mattress. Being on the sofa watching TV because a person was too ill to get around, would be counted as a bed day. The important distinction here is whether the person was ill enough to be required to be in bed for all or most of the day.

7

Question 7. Days Lost From Work for Persons
17 Years of Age or Older

7

Ask if 17+ years.	_____ Days (9)
7. How many days did his . . . keep him from work during that 2-week period? For inmates: not counting work around the house?	as None (9)

1. Mark the "None" box for persons 17+ if no days were lost from work or if the person doesn't work. If you learn that the person would not have been working during the past two weeks, whether sick or well, mark the "None" box without asking the question for any other conditions for which question 7 requires an entry.

2 Work - Paid work as an employee for someone else for wages, salary, commission or pay "in kind" (meals, living quarters, or supplies provided in place of cash wages). Also, include work in the person's own business, professional practice or farm and work without pay in a business or farm run by a related household member.

Exclude work around the house, volunteer unpaid work, such as for church, Red Cross, charity, and service in the Armed Forces.

3 Work-Loss Day - Any scheduled work day in which the person stayed home from work for all or most of the day because of the condition for which you are completing this page. All or most of the day is defined as more than half of the hours usually spent at work.

4 Disregard School Days - If a person 17 years of age or over goes to school instead of, or in addition to, working, record only the days lost from work (disregarding any days lost from school). Include any days lost from school for persons 17 and over in days of restricted activity (question 5).

8

Question 8, Days Lost From School for Persons 6-16 Years

8

Ask of 6-16 years: 8. How many days did his . . . keep him from school during that 2-week period?	<input type="checkbox"/> Days or <input type="checkbox"/> None
---	---

1 Mark the "None" box for persons between the ages of 6-16 who had no days lost from school, or for persons who do not attend school. If you learn that the person would not have been going to school during that period whether sick or well, mark the "None" box without asking the question for any other conditions for which question 8 requires an entry.

2 School-Loss Day - Any scheduled school day when more than half of the day was lost because of this condition.

If a person goes to school only part of a day and loses more than half of that time, count it is a day lost.

3 School Vacation - Ask this question even during the periods of the year which might normally be considered vacation periods, since school vacation periods are not all the same and some persons attend summer sessions.

4 Disregard Work Days - If a person 6-16 years of age works instead of, or in addition to, going to school, record only the days lost from school (disregarding any days lost from work). Any days lost from work for persons 6-16 years of age should be included in days of restricted activity (Question 5).

Question 9, Onset of Condition

9. When did -- first notice his ...?	
1 <input type="checkbox"/> Last week	4 <input type="checkbox"/> 2 weeks-3 months
2 <input type="checkbox"/> Week before	5 <input type="checkbox"/> Over 3-12 months
3 <input type="checkbox"/> Past 2 weeks-OK which	6 <input type="checkbox"/> More than 12 months ago
(Was it during the past 12 months or before that time?)	
(Was it during the past 3 months or before that time?)	
(Was it during the past 2 weeks or before that time?)	

1 First Noticed - When a condition first began to give any trouble or show any symptoms. If the respondent seems uncertain of the date of onset, ask the first probe, "Was it during the past 12 months or before that time?" Ask the additional probe questions as necessary in order to mark the appropriate box. If the answer has been given previously, verify and mark the appropriate box without actually asking question 9.

a For the after effect of an old injury (one which happened more than three months ago), it is the day when the present ill-effects were first noticed.

b For a condition that has continued for a long time, as might be the case with deafness, mental retardation, or stomach ulcer, the date might be many years ago. Some conditions, which a person has all of the time, manifest themselves in more serious ways from time to time. It is the date the trouble was first noticed, not the date of the most recent attack or flare-up.

c For conditions which usually last a short time, such as colds, virus, flu, etc., but occur frequently, it is the date of the most recent attack.

3 Reference Period

Past 2 Weeks - The 2 weeks ending the Sunday night before the interview.

Past 3 Months - The 3 months ending the Sunday night before the interview beginning with that Sunday's date 3 months earlier.

Past 12 Months - The 12 months ending the Sunday night before the interview and beginning with that Sunday's date a year earlier.

(A3)

Interviewer Check Item A3

(A3)

A3	<input type="checkbox"/> 1 Not an eye cond. (AA)	<input type="checkbox"/> 3 First eye cond. (6- yrs.) (70)
	<input type="checkbox"/> 2 First eye cond. (under 6) (AA)	<input type="checkbox"/> 4 Not first eye cond. (AA)

- 1 There must be an entry in one of the four boxes in item A3 for each completed Condition page. An eye condition is any condition concerning the eyes or vision, such as watery or weak eyes (except as effects of allergy), conjunctivitis, cataracts, glaucoma, etc. Ask the respondent if the condition is an eye condition if you do not know or are not sure.
 - a "Not an eye cond." - Mark this box for each condition which is not an eye condition.
 - b "First eye condition (under 6)" - Mark this box if the person is under six years old and this is the first or only eye condition or vision problem reported.
 - c "First eye cond. (6+ yrs.)" - Mark this box if this is the first or only eye condition or vision problem reported and the person is six years old or over.
 - d "Not first eye cond." - Mark this box if the condition on this Condition page is an eye condition but is not the first eye condition reported for this person.
- 2 Mark A3 based on your entry in A2. For example, item 1 and 3a - headaches, 3b - weak eyes, mark A3 "Not an eye cond." because you are filling this page for headaches. (A2 is marked Q. 3a.)

10

Question 10, Vision Question

10

10. Can -- see well enough to read ordinary newspaper print			
WITH GLASSES with his	{ left }	eye? Y	z N
	{ right }	eye? Y	z N

- 1 If you marked "First eye cond. (6+ yrs.)" in 43, ask question 10. Be sure to read the statement clearly so that the respondent hears the phrase "with glasses" since many people who have serious eye trouble are not limited when they are wearing their glasses, even though they may be limited without them. If the person uses glasses, the answers to question 10 should be in terms of what the person can read when using glasses. "Glasses" also include contact lens.
- 2 Ask question 10 separately for each eye. When asking this question first use "left" and circle "Y" or "N" according to the response. Then reask question 10 using "right" and circle the appropriate letter.
- 3 For persons who cannot read (illiterate), this question refers to their ability to see with either eye well enough to read if they knew how.

AA

Item AA, When to Complete Questions 11-16

AA

AA	<ul style="list-style-type: none">1 <input type="checkbox"/> Missing extremity (A4)2 <input type="checkbox"/> Condition in C2 does not have a letter as source (A4)3 <input type="checkbox"/> Condition in C2 has a letter as source, Doctor seen (11)4 <input type="checkbox"/> Condition in C2 has a letter as source, Doctor not seen (15)
----	--

- 1 Mark one of the boxes in item AA to indicate if the condition is a missing extremity or has a letter as source (from the condition list) in C2.
- 2 Consider as missing extremities all or part of a missing finger, hand, arm, toe, foot, or leg.
- 3 If the condition has a letter as source, refer to question 2 of this Condition page to see if a doctor was seen and mark the corresponding box.
 - a If the entry in question 2 is "Never," "DK if doctor seen," or if the only time a doctor was seen was during interview week, consider this as "Doctor not seen."
 - b If the doctor was seen for this condition, continue with questions 11-16, as appropriate. These questions obtain information about what people who have certain conditions do or take for them and the extent to which they are bothered by these conditions.

NOTE: If the condition is a "Missing extremity," mark this box and go to A4 even if the condition has a letter as source.

11

Question 11, Now Take Any Medicine or Treatment

11

11a. Does -- NOW take any medicine or treatment for his ...?	1 Y
	2 N (12)

11b. Was any of this medicine or treatment recommended by a doctor?	1 Y
	2 N

- 1 In 11a the medicine or treatment may be on a regular basis, such as medication for glaucoma or on an irregular basis when the medicine or treatment is taken whenever the person experiences an attack of the condition, such as aspirin for repeated back trouble.
- 2 In 11b the medicine does not have to be prescription medicine but anything the doctor advised or recommended. This is also true for the treatment of a condition, for example, wearing a leg brace for palsy.

12 - 13

Questions 12 and 13

Ever Had Surgery/Hospitalization for Condition

12 - 13

12. Has he ever had surgery for this condition?	1 Y
	2 N

13. Was he ever hospitalized for this condition?	1 Y
	2 N

- 1 If a question arises, we are interested in this particular condition not any the respondent may have had in the past which was subsequently cured. For example, if the reported condition was "cataract" ask the question, "Have you ever had surgery for this cataract?"
- 2 The definition for "this condition" in question 13 is the same as in question 12.

14

Question 14,

Number of Doctor Visits During the Past 12 Months

14

14. During the past 12 months, about how many times has
-- seen or talked to a doctor about his . . .? _____ Times
(Do not count visits while a patient in a hospital.) ooo None

In question 14, include the phrase within the parentheses if a hospitalization was recorded in C1 for the person for whom this Condition page is being filled. Ask the question even if the answer to question 2, "When last saw or talked to doctor?", is more than a year ago. The reason for this is that question 2 is asked about the entry in item 1 (from item C2), while question 14 may be asked about the entry in item 1 or question 3. Make no change in question 2 because of the answer to question 14.

15

Question 15, Bed/Work Loss Days During Past 12 Months

15

15a. About how many days during the past 12 months has
this condition kept him in bed all or most of the day? _____ Days
ooo None

Ask if 17+ years:

b. About how many days during the past 12 months has
this condition kept him from work? _____ Days
For females: Not counting work around the house? ooo None

- 1 Include days in the hospital during the past 12 months for this condition as bed days.

The number of days in bed in question 15a, cannot be less than the number in question 6, since "the past two weeks" is part of the "past 12 months." When inconsistencies occur, resolve the differences with the respondent.

- 2 In question 15b, record the number of workloss days during the past 12 months for persons 17+ for this condition. The entry for this question cannot be less than the entry in question 7. If this situation occurs, resolve the differences with the respondent as in question 15a.

Question 16, Condition Bothers

16

16a. How often does his . . . bother him - all of the time, often, once in a while, or never?

1 All the time 2 Often 3 Once in a while

4 Never (16c) 5 Other - Specify _____

b. When it does bother him, is he bothered a great deal, some, or very little?

1 Great deal 2 Some 3 Very little

4 Other - Specify _____

All the time in 16a OR condition list 4 asked (A4)

c. Does -- still have this condition?

1 Y (A4) 2 N

d. Is this condition completely cured or is it under control?

1 Cured 2 Under control (A4)

3 Other - Specify _____ (A4)

e. About how long did -- have this condition before it was cured?

1 Less than one month 2 _____ Months 3 _____ Years

16

In this question we are interested in the respondent's evaluation of the extent to which a condition troubles the person. Therefore, there is no definition for the term "bother"; it is to be defined by the respondent.

- 1 Mark the appropriate box in 16a depending on the answer you receive. If the answer given is not the same as one of the categories included in the question, reask the question. If the answer still is not the same as one of the listed categories, mark the "Other" box and record the respondent's answer verbatim. If the answer given indicates that the person is not bothered at all by the condition, mark the "Never" box.
- 2 Ask question 16b to determine to what extent the person is bothered. Follow the same procedures as given for question 16a.
- 3 If you marked "All the time in 16a," or if you asked Condition list 4 (refer to item L) mark the box above 16c and go to A4. Otherwise, ask 16c and circle the appropriate letter.
- 4 Ask question 16d to determine whether the condition is cured or is under control. "Under control" refers to situations in which persons, by following a certain diet, taking medicine, and so forth, no longer have the symptoms of the condition. However, if they were to stop doing these things, the symptoms might recur.
- 5 Ask question 16e to determine how long the person had the condition before it was cured. If a question is raised, the time period to be reported is from the time the person first noticed something was wrong until the condition was considered "Cured."

(A4)

Interviewer Check Item A4

(A4)

A4	<input type="checkbox"/> Accident or injury	<input type="checkbox"/> Other (NC)
----	---	-------------------------------------

Complete item A4 for each condition. Carry all injuries through the accident questions whether or not they were associated with an accident.

(17)

Question 17, When Did the Accident (or Injury) Occur

(17)

17a. Did the accident happen during the past 2 years or before that time?	
<input type="checkbox"/> During the past 2 years	<input type="checkbox"/> Before 2 years (18c)

b. When did the accident happen?	
<input type="checkbox"/> Last week	<input type="checkbox"/> Over 3-12 months
<input type="checkbox"/> Week before	<input type="checkbox"/> 1-2 years
<input type="checkbox"/> 2 weeks-3 months	

- 1 Ask question 17a to determine whether the accident (or injury) occurred "During the past 2 years" or "Before 2 years."
- 2 Ask question 17b only if the accident or injury occurred during the past two years. If the accident was exactly three months ago (three months prior to last Sunday's date), mark the "2 weeks-3 months" box. If the accident occurred exactly 12 months ago, mark the "Over 3-12 months" box.

Question 18, Effects of Accident or Injury

18a. At the time of the accident what part of the body was hurt?
 What kind of injury was it? Anything else?

Part(s) of body	Kind of injury

If accident happened more than 3 months ago, ask:
 b. What part of the body is affected now?
 How is his -- affected? Is he affected in any other way?

Part(s) of body	Present effects

- 1 Ask the first part of question 18 and record in the space provided the "part(s) of body" which the respondent mentions. Next ask, "What kind of injury was it?" and record in the answer space the kind of injury for each part of body. Ask "Anything else?" and record any other "part(s) of body" and "kind of injury" for any other injuries mentioned.
- 2 General, vague answers, such as "hit," "blood clot," "bumped," "mashed," etc., are not acceptable entries for the kind of injury since they do not provide sufficient information on the nature of the injury. The specific part of body which was injured should be recorded in the same detail as shown below question 3e. The following are some examples of adequate entries for question 18a:

<u>Adequate</u>		<u>Inadequate</u>	
<u>Part(s) of body</u>	<u>Kind of injury</u>	<u>Part(s) of body</u>	<u>Kind of injury</u>
One Knee	Fractured	Arm	Crushed
Both Upper legs	Bruised	Leg	Mashed
One Eye	Bruised	Spine	Hit with ball
1/ Head	Concussion	Head	Injured
One Hand	Cut	Arm	Caught in washing machine
Lower back	Dislocated	Back	Hurt

1/ Part of head is not required for concussion.

18

Effects of Accident or Injury (Continued)

18

- 3 For accidents or injuries which happened more than three months ago, we need to know how the injury affects the person now. This information is obtained by asking question 18b. Record the part of body in the same detail and in the same manner as for question 18a. Record only the part of body which presently manifests any ill-effects of the old injury. See page D4-7, par. 4 for multiple present effects instructions.
- a If the present effects have been reported earlier in question 3, question 18b need not be asked again but the entries must be transcribed to 18b from question 3. For example, if the entry in 3a is "missing hand" and the "Accident or injury" box is marked in 3b, the information must be transferred to 18b as follows: "One hand" in the part of body space and "missing" in the space for present effects. These entries can be made without actually asking the first part of question 18b. However, you must ask, "Is he affected in any other way?"
- b When the answer to 18b is vague or expressed only in terms of some limitation, enter the limitation but also transcribe the entry from question 3, if that represents a more adequate description of the present effects. For example, in question 3, a person has a stiff elbow caused by an accident. In answer to 18b, the respondent says, "He can't bend his arm." In this case, enter "can't bend arm" on the first line and the question 3 entry, that is, "stiff elbow" on the second line. In cases where the question 3 answer does not clarify the entry, reask question 18b to determine how the person is affected.
- c It is not necessary that the person be suffering from ill-effects this instant to report them in 18b. If the person is subject to periodic recurring attacks of a condition caused by an old accident or injury, record these effects.
- d If a person reports ill-effects of an old injury, record them even though they may not "bother" him within the literal meaning of the word. For example, a person may report a stiff elbow caused by an old football injury. He may say he had gotten used to it and it never bothers him. "Stiff elbow" would be considered the present ill-effects of the old injury.
- e For an injury which happened earlier but has not yet healed, enter the original injury in question 18b as the "Present effects." For example, in the case of a fractured hip occurring four months before the interview, the entry "fractured hip" is appropriate in question 18b if the fracture has not yet healed. For these cases, indicate that the injury has not yet healed.

NOTE: "Slipped disc," "slipped vertebrae," "dislocated disc," or "ruptured disc" are acceptable "present effects."

Question 19, Where Did the Accident Happen

19. Where did the accident happen?	
1	<input type="checkbox"/> At home (inside house)
2	<input type="checkbox"/> At home (adjacent premises)
3	<input type="checkbox"/> Street and highway (includes roadway and public sidewalk)
4	<input type="checkbox"/> Farm
5	<input type="checkbox"/> Industrial place (includes premises)
6	<input type="checkbox"/> School (includes premises)
7	<input type="checkbox"/> Place of recreation and sports, except at school
8	<input type="checkbox"/> Other -- Specify _____

- 1 Home - "Home" as used here includes not only the person's own home but also any other home, vacant or occupied, in which the person was when the injury occurred, as well as homes being remodeled or undergoing repair. Do not consider an accident occurring at a house under construction as occurring at home, but mark the box "Industrial place" for these.
- a At Home (Inside House) - The accident occurred while the person was inside the house, in any room or porch but not an inside garage. Consider porches, or steps leading directly to porches or entrances, as "inside the house." Falling out of a window or falling off a roof or porch also are included as inside the house. Also include in this category injuries happening within motel or hotel rooms. The lobby, corridors and other public places within the motel or hotel premises are not regarded as "home." Mark them as "Other," and specify.
- b At Home (Adjacent Premises) - The accident occurred in the yard, the driveway, patios, gardens or walks to the house or a garage. On a farm, the adjacent premises include the home premises or garage, but not the barns or other buildings (unless used as a garage) or the land under cultivation.
- 2 Street and Highway - "Street and highway" means the entire width between property lines of which any part is open for use of the public as a matter of right or custom. This includes more than just the traveled part of the road. "Street and highway" includes the whole right-of-way. Public sidewalks are part of the street but private driveways, private lanes, private alleys, and private sidewalks are not considered part of the street.
- 3 Farm - The accident occurred in a farm building or on land under cultivation but not in the farm home or premises. "Farm" includes a ranch, as used here.

Question 21, Motor Vehicle Involved

21a. Was a car, truck, bus, or other motor vehicle involved in the accident in any way?	1 Y	2 N (NC)
b. Was more than one vehicle involved?	Y	N
c. Was it (either one) moving at the time?	1 Y	2 N

Ask question 21 to determine if any motor vehicles were involved in the accident and in what way they were involved.

- 1 Motor Vehicle - A power operated vehicle, not on rails, for transporting persons or property, intended for use on a land highway, either public or private; or a self-propelled nonhighway vehicle, such as construction equipment, tractor, farm machinery, or tank when operating on a highway. Attached objects, such as a sled, coaster, or trailer are considered as part of the motor vehicle.
- 2 Normotor vehicles - Recreation vehicles, such as mini-bikes, go-carts, or snowmobiles are not usually included in the definition of motor vehicles. The only time they are classified as motor vehicles is when they are in operation on a land highway. Do not consider certain normotor vehicles, such as trains, streetcars, or bicycles as motor vehicles.
- 3 Circle "Y" in question 21a for each accident involving a motor vehicle in any way at all, regardless of whether the person was in the vehicle and regardless of whether the vehicle was moving at the time of the accident. For example, a pedestrian hit by a car, a person on a bicycle hurt by running into a parked car, a person hurt while repairing a car. Report these as accidents involving a motor vehicle as well as the case of a person hurt in a collision or some other type of accident while riding in a motor vehicle.
- 4 In question 21b, be careful that only motor vehicles are included. Exclude normotor vehicles.
- 5 Motor Vehicle, Moving - If there is a question, consider the motor vehicle as moving if the wheels were moving (this includes skidding) or if the vehicle had come to a stop just an instant before the accident occurred.
 - a If only one motor vehicle was involved ("No" in question 21b), ask question 21c without the parenthetical phrase.
 - b If a motor vehicle and a normotor vehicle were involved, for example, a bus and train collision, substitute "motor vehicle" or "bus" for "it" to be sure the respondent understands that question 21c refers to the motor vehicle and not to the other vehicle.

CHAPTER 5. DOCTOR VISITS PAGES

A General Procedure

The Two-Week Doctor Visits page consists of two facing pages containing columns for four doctor visits. Complete a separate column for each doctor visit or call recorded in the "DV" box in item C1. If there are more than four two-week doctor visits reported for a family, use additional questionnaires. Begin with the first person reporting doctor visits, complete a column for each of his doctor visits, and continue in the same manner for each succeeding person.

- B Two or More Doctors Seen on Same Visit - If two or more doctors were seen on the same visit, fill a doctor visit column for each doctor seen and indicate this in a footnote. Situations of this kind generally occur when a person visits a clinic where he sees doctors with different specialties; for example, a dermatologist in one office and an internist in another office. It might also occur when a person visits his family doctor who, in the course of the same visit, calls in a specialist to examine or treat the person.
- C Visit to Doctor and Laboratory on Same Visit - The previous rule also applies to a person who visits a doctor and is immediately sent by the doctor to a neighboring laboratory for tests, X-rays, and so forth. Consider this a separate visit if the laboratory is not a part of the doctor's office or clinic and renders a separate bill for its services.
- D Consistency Check - You may find it helpful to make a check mark to the right of the number of visits in item C1 as you complete each doctor visits column, for example 2 ✓. This indicates that two columns have been completed for that person's doctor visits. Before leaving the Two-Week Doctor Visits pages, count the number of completed doctor visit columns for each person (excluding any that you have deleted). If this number differs from the number of visits in item C1, make any corrections necessary to make the entries consistent as follows:

Add to C1 any additional visits first reported in question 2b on the Doctor Visits page.

or

Subtract from item C1 any that you have deleted because they were outside the two-week reference period or "mass visits."

E Mass Visits - These are visits for shots or examinations (such as chest X-rays) administered on a mass basis. Thus, if the person went to a clinic, a mobile unit or some similar place to receive an immunization, a single chest X-ray or a certain diagnostic procedure which was being administered identically to all persons who were at the place for this purpose, this would not be counted as a visit.

NOTE: However, physicals for athletes or the armed services are not mass visits, and are included in the doctor visits questions.

If when filling a doctor visit column, a "mass visit" is discovered, delete it by "X"-ing out the entire column and writing "mass visit" in the column. Probe to determine if there were any other two-week visits and if so, enter the person number, the date in question 2, complete a column and correct the entry in item C1, if necessary. If there were no other doctor visits, enter "mass visit" and correct the entry in item C1, if necessary.

F Special Note on Frequent Doctor Visits for the Same Person - Sometimes a person sees or talks to a doctor several times during the reference period. If the respondent cannot remember or does not know the dates of each different visit, ask for an estimate, using the calendar when needed. Enter all available information in a separate column for each estimated visit.

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①

Item 1, Person Number

①

1. Person number _____

Enter the person number for whom the "visit" information is being obtained. This entry identifies the person who has made the visit and is essential for tabulation purposes. If it is incorrect, all of the "visit" information will be attributed to the wrong person.

2

Question 2, Date of Visit

2

<p>Earlier, you told me that -- had seen or talked to a doctor during the past 2 weeks.</p> <p>2a. On what (other) dates during that 2-week period did -- visit or talk to a doctor?</p> <p>b. Were there any other doctor visits for him during that period?</p>	2a.	<table border="0"> <tr> <td style="border-bottom: 1px solid black; width: 15%;"></td> <td style="border-bottom: 1px solid black; width: 15%;"></td> <td style="border-bottom: 1px solid black; width: 15%;"></td> <td style="border-bottom: 1px solid black; width: 15%;"></td> <td style="border-bottom: 1px solid black; width: 15%;"></td> <td style="border-bottom: 1px solid black; width: 15%;"></td> </tr> <tr> <td style="text-align: center; font-size: small;">Month</td> <td style="text-align: center; font-size: small;">Date</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3" style="text-align: center; font-size: x-small;">Y (Reask 2a and b)</td> <td colspan="3" style="text-align: center; font-size: x-small;">N (Ask 3-6 for each visit)</td> </tr> </table>							Month	Date					Y (Reask 2a and b)			N (Ask 3-6 for each visit)		
Month	Date																			
Y (Reask 2a and b)			N (Ask 3-6 for each visit)																	

- 1 Read the introductory statement above question 2a only once for each family before asking question 2a for the first doctor visit. Insert for the dashes the names of all family members for whom you have recorded doctor visits in the "DV" box in C1.
- 2 Use question 2a to record the date of each doctor visit. Ask the question as worded, unless you know the "visit" you are asking about is a telephone call. In which case say, "On what date during that two-week period did -- talk to a doctor?" If more than one visit is reported for a person, it is desirable (but not mandatory) to have the most recent visit listed first.
 - a An estimate of the exact date of the month is acceptable, but use the two-week calendar to help the respondent recall the exact date as closely as possible. If the exact date cannot be determined, determine the week. In this case, mark the "Last week" or the "Week before" box.
 - b If in recording the date of the visit, you learn that the visit actually took place outside the reference period (either before the two-week dates or during interview week), enter the date in 2a but delete this doctor visit by X-ing out the remainder of the column and correct item C1.
- 3 Question 2b serves to remind the respondent of any additional visits that he may have forgotten to report earlier. Enter the dates of all visits reported in C1 for this person, then ask the question.
 - a If any additional two-week visits are reported, circle "Y" in the last column for this person and reask question 2a, using the word "other". Record the column number of this person and the date(s) for the additional visit(s) in question 2a of the next column(s) and correct the entry in C1 for the person.
 - b Note that question 2b must always have a "No" entry in a person's last doctor visit column since a "Yes" entry in question 2b requires the filling of another column which in turn requires the reasking of question 2b. If the answer to that question is "Yes," still another doctor visit column must be filled. If the answer is "No," that is the last column for the person.

3

Question 3, Place of Visit

3

<p>3. Where did he see the doctor on the <u>(date)</u>, at a clinic, hospital, doctor's office, or some other place?</p> <p>If Hospital: Was it the outpatient clinic or the emergency room?</p> <p>If Clinic: Was it a hospital outpatient clinic, a company clinic, or some other kind of clinic?</p>	<p>3.</p> <p><input type="checkbox"/> 0 While inpatient in hospital (Next DV)</p> <p><input type="checkbox"/> 1 Doctor's office (group practice or doctor's clinic)</p> <p><input type="checkbox"/> 2 Telephone</p> <p><input type="checkbox"/> 3 Hospital Outpatient Clinic</p> <p><input type="checkbox"/> 4 Home</p> <p><input type="checkbox"/> 5 Hospital Emergency Room</p> <p><input type="checkbox"/> 6 Company or Industry Clinic</p> <p><input type="checkbox"/> 7 Other (Specify) <u>7</u></p>
---	---

Ask question 3, inserting the date of the visit. If the response to this question is "Hospital" or "Clinic," ask the appropriate probe question to determine if this was the outpatient clinic, emergency room, company clinic, etc. Mark the box which indicates the kind of place (not the name of the place) in accordance with the following definitions:

- 1 While Inpatient in Hospital - Any doctor's visit which occurred while the person was in a hospital overnight or longer.
- 2 Doctor's Office - The office of a doctor in private practice. This may be an office in the doctor's home, an individual office in an office building or a suite of offices occupied by several doctors. This category also includes "doctors' clinic," meaning the offices of a group of doctors.
- 3 Telephone - A telephone call made to, or from a doctor or doctor's office which relates to treatment or advice given by a doctor directly or transmitted through a nurse.
- 4 Hospital Outpatient Clinic - A unit of a hospital where persons may go for medical care without being admitted as an inpatient.
- 5 Home - Any place the person was staying at the time of the doctor's visit. It may be his own home, the home of a friend, a hotel room, etc.
- 6 Hospital Emergency Room - A unit of a hospital where persons may receive medical care, usually of an urgent nature, without or before being admitted as an inpatient. However, if the person is admitted to the hospital as a result of this visit, footnote the situation and do not ask the remaining questions for this visit. Make any necessary corrections to item C1.
- 7 Company or Industry Clinic - A company or plant doctor's office or clinic which is operated solely for the employees of that company or industry.
- 8 Other (Dispensaries, Community Health Centers, Etc.) - Specify or give the best description of the place which you can obtain.

4

Question 4, Kind of Doctor

4

4. Is the doctor a general practitioner or a specialist?	4. <input type="checkbox"/> General practitioner <input type="checkbox"/> Specialist - What kind of specialist is he? 7
--	---

- 1 If the respondent says the doctor is a specialist, mark the "Specialist" box and ask the follow-up question. Record the kind of specialist named by the respondent. If the respondent does not know the term for the specialist, but only knows the specialty, enter that information in the space provided, for example, heart ailments, X-ray doctor, etc.
 - a A general practitioner is a medical doctor whose practice is not limited to a specialty.
 - b A specialist is a medical doctor whose practice is limited to certain groups of people (children, women, etc.), certain conditions (diabetes, arthritis, etc.), certain parts of the body (eyes, ears, nose and throat, etc.) or special procedures (anesthesia, radiology, etc.).
 - c Do not make double entries, for example, GP and internist, without some further explanation of the entry. If the respondent cannot specifically say whether the doctor is a GP or an internist, your entry should reflect this fact such as "GP or internist—DK which."
 - d If the respondent does not know whether or not the person rendering the service for this visit is a doctor, enter "DK if Dr." Also enter any other information available which describes the person providing the service, such as "lab technician," or "X-ray technician."

- 2 If you learn that the doctor is not a medical doctor at all, it is particularly important that this fact be noted. In this case, enter "Not an MD" and also describe what he does, for example, chiropractor, oral surgeon, dentist. Do not delete these kinds of doctor visits from the Doctor Visits page even though they do not fit the definition of a medical doctor described earlier.

NOTE: In this question we are interested in the specialty of the doctor even though the doctor himself was not seen.

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5

Question 5, Doctor Seen or Talked to

5

5. During this visit (call) did ... actually see (talk to) the doctor?	5.	1 Y	2 N
--	----	-----	-----

This question determines whether the doctor was actually seen or talked to during this visit. If the person only saw or talked to a nurse in the doctor's office, circle "N." If "Telephone" is marked in question 3, use the phrases "call" and "talk to" when asking question 5.

C

6

Question 6, Purpose of Visit

6

<p>6a. Why did he visit (call) the doctor on _____ (date) ?</p> <p>Write in reason</p> <p>Mark appropriate box(es)</p>	<p>6b.</p> <p>1 <input type="checkbox"/> Diag. or treatment (6c)</p> <p>2 <input type="checkbox"/> General checkup (6b)</p> <p>2 <input type="checkbox"/> Pre or Postnatal care</p> <p>4 <input type="checkbox"/> Eye exam. (glasses)</p> <p>5 <input type="checkbox"/> Immunization</p> <p>6 <input type="checkbox"/> Other _____</p> <p style="text-align: right;">} (Next DV)</p>
<p>b. Was this for any specific condition?</p>	<p>b. Y (Enter condition in 6a and change to "Diag. or treatment") N (Next DV)</p>
<p>Mark box or ask:</p> <p>c. For what condition did -- visit (call) the doctor on _____ (date) ?</p>	<p>c. <input type="checkbox"/> Condition reported in 6a</p>

- 1 Ask question 6a, inserting the date the visit was made. Then write in the response verbatim and mark one or more of the boxes provided which best describes the answer given.

a Diagnosis or Treatment

- 1) An examination or test to diagnose an illness, regardless of whether the examination or tests resulted in a diagnosis.

or

- 2) Treatment or advice given by the doctor or under the doctor's supervision. Include X-rays either for diagnostic purposes or treatment in this class.

Mark this box when the visit is for the detection of a condition(s) by use of a glaucoma test, diabetes test, blood test, T.B. test, or a pap smear for cancer. Do not enter the condition in 6c or C2 unless it was discovered on this visit. Also mark this box if the reason for the visit is to receive vitamin or hormone shots.

If the visit is for a specific condition and while there the person is given a general checkup, mark both the "Diag. or treatment" and the "General checkup" boxes.

- b General Checkup - A visit to a doctor for the purpose of determining the general state of the person's health. This category includes checkups for specific purposes, such as physical examinations required to obtain employment, for college entrance, to obtain insurance, periodic (yearly) general checkups, visits to the well-baby clinic, etc.

However, do not classify a visit to a doctor for a checkup or examination for a specific condition, such as when a person goes at regular intervals for a checkup for T.B. or a heart condition, as "General checkup." Classify this as "Diag. or treatment."

⑥ Purpose of Visit (Continued)

⑥

- c Pre or Postnatal Care - Consultation concerning the care of the mother, not the baby. Include visits by the mother to the doctor for checkups during the pregnancy and also during the period just after delivery. Exclude consultation for illnesses not related to pregnancy or delivery.
- d Eye Examination - An examination of the eyes for the purpose of establishing a need for eyeglasses or for a change in the type of eyeglasses being worn. Any other eye examination or treatment of an eye condition is classified as "Diag. or treatment."
- e Immunization or Vaccination - Shots or injections to prevent particular diseases.
- f Other - Used to record medical services received other than those listed or those which you do not know how to classify. Record the type of service as reported by the respondent. If necessary, use the footnote space for continuing the description of the medical service received.

2 Sometimes more than one service is provided during the same visit; if this is discovered, record all services received during one visit. However, do not probe for any additional services but enter them only if they are voluntarily reported together, for example, the respondent says, "I had a prenatal checkup; the doctor also gave me heat treatment for a slipped disc." In this case, mark both "Pre or Postnatal care" and "Diag or treatment."

NOTE: If multiple reasons are given for the same doctor visit, follow the skip instruction for the category appearing first in the list.

3 Ask question 6b only if the "General checkup" box is marked in 6a. If a condition is given, circle "Y" and enter the condition in 6a. Then correct the box in 6a to "Diag. or treatment."

If it is volunteered that a condition was discovered during a routine physical examination, do not enter this condition as the reason for the doctor visit unless there were symptoms which led to the examination. If there were symptoms of this condition, make the necessary corrections. If there were no symptoms, leave the original entries.

4 Ask or mark 6c only if the "Diag. or treatment" box is marked in 6a.

a If you already have a condition in the write-in box in 6a, mark "Condition reported in 6a" in the answer space in 6c without asking the question.

⑥ Purpose of Visit (continued)

⑥

- b If you ask 6c, record all conditions (or reasons for seeing the doctor) mentioned for that person in the answer space.
- c If the person visited the doctor for tests but no specific condition was discovered, enter the response verbatim.

Note: If the entry in 6a is "check up after operation," "checkup after accident," or something similar, the "Diag. or Treatment" box should be marked in 6a. Ask question 6c to obtain the name of the condition requiring these checkups.

⑥ P1

Interviewer Check Item P1

⑥ P1

P1

A Condition page is required for the condition in question 6. If there is no Condition page, enter condition in item C and fill a page for it after completing columns for all required doctor visits.

Interviewer Check item P1 is a reminder to you that a Condition page must be filled for each condition reported on the 2-weeks Doctor Visit page. If there is no Condition page for this condition, enter the condition in item C2 with "DV" as the source and fill a page for it after completing all required doctor visit columns.

If this condition was described in item 1, question 3a or 18b on a completed Condition page, do not enter it in C2 or fill a separate page.

CHAPTER 6. HOSPITAL PAGE

A General Procedure

The Hospital page consists of two facing pages containing columns for four hospitalizations. Complete a separate hospital column for each hospitalization recorded in the "Hosp" box in item C1. If there are more than four hospitalizations reported for a family, use additional questionnaires. Begin with the first person reporting hospitalizations. Complete a column for each of his hospitalizations, and continue in the same manner for each succeeding person in the order they are listed on the questionnaire.

- 1 If a person was moved (transferred) from one hospital to another, for example, from an emergency hospital to a general hospital or from a general hospital to an extended care facility, record each as a separate stay.
- 2 When a hospitalization is for childbirth, fill one column for the mother and a separate column for the baby.

B Consistency Check - The number of columns filled for a person must equal the total number of hospitalizations in that person's column of item C1. If not, correct the figure in item C1 and explain the reason for the correction in a footnote. You may find it helpful to make a checkmark to the right of the number in item C1 as you complete each column. If the person had a total of three hospital stays recorded in item C1, there should be three checkmarks, for example, "3✓."

C Use the Appropriate Word When Asking the Question

Because the Hospital page is filled for stays in regular hospitals as well as for stays in nursing homes, convalescent homes, rest homes and similar places, refer to the appropriate type of place in each question. The questions contain the words "nursing home" in parentheses. The instructions in later paragraphs use the word "hospital." However, the instructions given for a hospital stay also apply to stays in nursing homes, rest homes and similar places.

D Special Note on Frequent Hospitalizations for the Same Person

Sometimes a person has been in and out of the hospital several times during the reference period. If the respondent cannot remember or does not know the details of each different stay, ask for an estimate of the necessary information using the calendar when needed. Enter all available information in a separate column for each estimated stay.

F Check With Question 6 or 15 of Appropriate Condition Page

If the hospitalization is for a condition for which you have filled a Condition page, ask if the nights reported in question 5 of the hospital column have been included in the number of bed days reported in question 6, or question 15a if the condition was carried past item AA. If they have not, correct the entry in question 6 or 15a. This check may be made after the hospital column(s) for the person have been completed.

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Item 1, Person Number

①

1. Person number _____

Enter the person number of the person for whom the column is being completed. This number must be correct. Otherwise, all the hospital information will be assigned to the wrong person.

2

Question 2, Date Entered Hospital

2

You said that -- was in the hospital (nursing home) during the past year.	USE YOUR CALENDAR	Month	Date	Year
2. When did -- enter the hospital (nursing home) (the last time)?	Make sure the YEAR is correct.	2.		19__

- 1 Read the introductory statement above question 2 once for a family before asking question 2 for the first hospitalization. Insert for the dashes the names of all family members for whom you have recorded hospitalizations in the "Hosp" column in C1. If stays are reported in both a hospital and nursing home, read the introductory phrase as follows: "You said that you were in a hospital and a nursing home during the past year. Which place were you in last, the hospital or the nursing home?" so that you can insert the appropriate word in the following questions. Then continue with question 2.
- 2 If the person was in a hospital or a nursing home more than once during the period, add the parenthetical phrase, "the last time," to the end of question 2. Record the most recent hospital or nursing home stay first if the person had more than one stay. For the remaining columns, begin with the question, "When did you enter the hospital the time before?" and so on, for each subsequent hospitalization.
- 3 If the respondent cannot furnish the exact date, obtain the best estimate possible. Use the calendars or the list of holidays in your flashcard booklet to assist the respondent in recalling dates. Ask whatever additional questions seem appropriate.

Some examples of questions you might ask to assist the respondent in recalling dates are:

Can you recall the approximate date?

Do you know which week of the month it was?

Do you recall the day of the week you entered the hospital?

Was it before or after Memorial Day (or some other special date)?

Was it in the early part, the middle part or the last part of the month?

- a If, after your additional probing, the respondent is unable to give an exact date, determine whether it was the early, middle, or late part of the month; winter, spring, summer, or fall; or one of two months, such as 05-06; or between two dates, such as 06-10.
- b You should always be able to make some sort of write-in entry in question 2. For statistical purposes, a date must always be assigned for each hospital entry, so it is essential that you obtain the maximum amount of information available.

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② Date Entered Hospital (Continued)

②

- 4 Experience has shown that it is very easy to make a mistake in entering the year a person was hospitalized, particularly when you are working in a different calendar year from the reported year of hospitalization. In all cases, make sure that you have entered the correct year in question 2.

3

Question 3, Name and Address of Hospital

3

3. What is the name and address of this hospital (nursing home)?	1. Name
	2. Street
	(City or county) State

- 1 Enter the name and address of the hospital (nursing home, rest home, sanitarium, etc.). The exact street address is not required, but the name of the street on which the hospital is located is needed to help identify the hospital. If the name of the street is not known, enter "DK." If the city is not known or the hospital is not in a city, enter the county and State.
- 2 It is important to obtain the full and complete name of the hospital in order to classify each hospital by type. If the respondent abbreviates the name or supplies only a shortened local name, such as county hospital or general hospital, when he means Baker County Hospital or Detroit General Hospital, it is necessary to obtain and record the full name.
 - a Be sure that you have the correct name of the hospital. For example, Baker County may operate a hospital but its name is Jeremiah Wilson Memorial Hospital. In such a case, it would be impossible to identify Baker County Hospital for classification. In cases in which it is possible that the respondent could be giving the name as it is referred to locally, ask the respondent if that is the complete name of the hospital.
 - b For college infirmaries, we need to know the name of the university or college and whether it is the student health center (clinic) or the college hospital. For example, infirmary at UCLA would not be classifiable, whereas, UCLA Student Health Service or University of California Hospital would be.
- 3 Be sure that your entries of the name of the hospital, the street, and the city or county are legible. If the respondent is not sure how to spell any one of the names, spell it phonetically and footnote that it is a phonetic spelling.
- 4 If you are interviewing in the general area in which the hospital is located and have ready access to a local telephone directory, check it for doubtful hospital names. Also, if the respondent does not know the name of the street on which the hospital is located, check the telephone directory for that, when possible.

④

Question 4, Number of Nights in Hospital

④

4. How many nights was -- in the hospital (nursing home)?	4 _____ Nights
---	------------------

- 1 In question 4, enter the total nights spent in the hospital. Do not include any nights in the interview week. However, enter all nights in the hospital through "last Sunday night" including nights prior to the date used in the hospital probe questions.

If the respondent's answer is in terms of days, repeat the question so that it is understood we are interested only in the number of nights. For example, a first answer of "I was in for seven days," might mean six, seven or eight nights. Always follow up such answers by repeating the question or asking an additional question to clarify the answer.

- 2 Not Overnight, Delete - If you learn that the person did not remain overnight for this stay in the hospital, enter a dash (-) in question 4 and do not ask any further questions about this hospitalization. Delete this hospitalization by X-ing out the remainder of the column and correct the figure in item C.
- 3 Entire Stay Prior to Reference Period, Delete - If the respondent's answer to the date of hospital entry for question 2 and the number of nights for question 4 indicates that the entire stay was prior to the reference period, that is, before the date specified in the hospital probe question, check with the respondent to verify that you have the correct date of entry and number of nights. If the entire stay was prior to the reference period for the hospital probe question, delete this hospitalization by X-ing out the remainder of the column and correct the figure in item C. Explain in a footnote that you have verified the date of entry and number of nights, and that the stay was prior to the reference period.

5

**Question 5, Nights in Past 12 Months and Two Weeks;
in Hospital Last Sunday Night**

5

Complete 5 from entries in 2 and 4, if not clear, ask the questions.	
a. How many of these -- nights were during the past 12 months?	5a. _____ Nights
b. How many of these -- nights were during the past 2 weeks?	5b. _____ Nights
c. Was -- still in the hospital (nursing home) last Sunday night for this hospitalization (stay)?	5c. Y N

Question 5 is divided into three parts, and each part can usually be answered based on the information obtained earlier in questions 2 and 4. In such cases, do not ask the questions, but be sure to make the appropriate entries.

1 Question 5a, Number of Nights in Past 12 Months - "The past 12 months" is defined as from "last Sunday's" date a year ago (entered in 12-month Bed Days and Doctor visit reference date in C2) through last Sunday night, and includes both the beginning and ending dates.

- a If the answer to question 5a is not clear from earlier information, ask the question, using the appropriate yearly calendar to assist the respondent in recalling dates.
- b If all the nights in question 4 were in the past 12 months, copy the question 4 figure to question 5a.
- c If none of the nights in question 4 were in the past 12 months, enter a dash (for none) in question 5a. Do not delete the column in such a case. Complete the remaining entries in the column.

2 Question 5b, Nights in Hospital During Last Two Weeks - If the date in question 2 and the number of nights in question 4 show that none of the nights in the hospital could possibly have been last week or the week before, enter a dash in question 5b. If there is any chance at all that any part of the hospitalization was in the two-week reference period, and the answer is not clear from earlier information, ask the question and record the number of nights or enter a dash as the case may be.

3 Question 5c, Still There Last Sunday Night - Circle "Y" or "N" for this hospital stay in question 5c. If the date in question 2 and the number of nights in question 4 show that this stay could not possibly have included last Sunday night, circle "N" without asking the question. If there is any doubt, ask the question.

NOTE: If the person was in the hospital last Sunday night for the most recent hospital stay, "N" would be circled in question 5c for any previously reported hospital stays.

6

Question 6, Condition Causing Hospitalization

6

<p>6. For what condition did -- enter the hospital (nursing home) -- do you know the medical name? If medical name unknown, enter an adequate description.</p> <p>For delivery ask: Was this a normal delivery? For newborn, ask: Was the baby normal at birth?</p>	<p>If "NO," ask: What was the matter?</p>	<p>Show CAUSE, KIND, and PART OF BODY in same detail as required for the Condition page.</p>	<p>6. <input type="checkbox"/> Normal delivery <input type="checkbox"/> Normal at birth Condition</p> <p>Cause <input type="checkbox"/> On Card C <input type="checkbox"/> Acc. or Inj.</p> <p>Kind</p> <p>Part of body</p>
---	---	--	---

- 1 The entry in question 6 should fully describe the condition for which the person entered the hospital. If the medical name is not known, enter the best description of the condition which the respondent can give. All the rules for the entry of "cause," "kind," or "part of body" for the Condition page apply to entries in question 6. If this information is required in question 6 but is not known by the respondent, enter "DK" on the line. If the present effects of allergy are needed, enter these effects on the "kind" line. Present effects of stroke are not required.
- a For the persons going to the hospital for tests or diagnosis, enter the results of the tests or the final diagnosis if known; otherwise, enter the trouble or condition that made the tests seem necessary and indicate the results or final diagnosis is not known (dk).
- b If the person entered the hospital to have an operation, other than "vasectomy," enter in question 6 the condition which made the operation necessary. For example, if the response is "Amputation of one leg above knee," ask for the condition which made the operation necessary, for example, diabetes, leg cut in accident, etc. If the condition for which the operation was done is unknown, enter this fact together with the name or description of the operation, for example, "Hysterectomy, DK reason."
- c If more than one condition was diagnosed or treated during a particular hospital stay, enter all such conditions.
- d If the condition for which the person entered the hospital is on Card C, mark the "On Card C" box to indicate no further entries are required. Do not mark this box if a Card C condition is given in answer to a later part of question 6, for example, cause, kind, or part of body. If two conditions are reported as the reason for entering the hospital and one is not on Card C, record the required entries for cause, kind, and part of body for this condition.
- e If the condition for which the person entered the hospital indicates that an accident or injury was involved, mark the "Acc. or Inj." box and proceed as in paragraph 2, below.

6

Condition Causing Hospitalization (Continued)

6

- 2 Accidents or Injuries - If the entry in question 6 is the result of an injury, the rules for the entries of "part of body" and "kind of injury" that apply to the Condition page, question 18a, also apply to question 6, for example, "one lower leg broken." Enter the kind of injury on the "Kind" line and the part of body on the "Part of body" line.
- 3 Deliveries and Births - For deliveries and births, ask question 6 this way:
- a For the mother ask, "Was this a normal delivery?" If "Yes," mark the "Normal delivery" box and go to question 7. If "No," ask, "What was the matter?" and record on the condition line the respondent's description of the complications, for example, delivery—breech.
- b For the baby ask, "Was the baby normal at birth?" If "Yes," mark the "Normal at birth" box and go to question 7. If "No," ask "What was the matter?" and record on the condition line the respondent's description of what was wrong with the baby, for example, newborn—incubator baby, jaundice.

NOTE: The delivery for the mother may be "Normal" but the baby may be born with a deformity. Conversely, the mother's delivery may have complications, for example, Caesarian section, but the baby may be normal. In some cases, it is possible that the mother's delivery may be complicated by an illness condition. When in doubt as to what constitutes "complications," enter all available information.

①

Question 7, Operations Performed

①

7a. Were any operations performed on -- during this stay at the hospital (nursing home)?	7a.	Y	N (Next Hosp)
b. What was the name of the operation?	b.		
If name of operation is not known, describe what was done.		Y (Describe) 7	N
c. Any other operations during this stay?	c.		

- 1 Ask question 7 for stays in nursing homes, rest homes, etc., as well as for hospital stays, since some of the procedures, which by our definition are operations, may be performed in these places.
- 2 If any operations were performed during this stay in the hospital, enter the name of the operation in the write-in space in 7b or 7c. If the name of the operation is not known, ask the respondent to describe what was done and enter this description. Be sure to record each operation, if more than one was performed during this stay.
 - a Operation - Any cutting of the skin, including stitching of cuts or wounds. Include cutting of other tissue, scraping of internal parts of the body, for example, curettage of the uterus, and setting of fractures and dislocations. Also, include the insertion of instruments in body openings for internal examination and treatment, such as bronchoscopy, proctoscopy, cystoscopy, GI series, and the introduction of tubes for drainage. Include anything ending in "-ectomy," for example appendectomy (removal of appendix), tonsillectomy (removal of tonsils), etc.
 - b In some cases, respondents may not think of the setting of fractures and dislocations or the stitching of cuts or wounds as operations. If the person entered the hospital for such an injury and the respondent says no operation was performed, ask if the bone or joint was set (put in traction or in a cast) or if stitches were taken in the cut or wound. If the answer is "Yes," enter the action taken as the name of the operation, for example, "Broken wrist" in question 6, "Wrist set" in question 7. If the respondent reports that the bone was not set, etc., explain the circumstances in 7c.
 - c Exclude injections, transfusions and routine blood tests, pumping out or washing out of the stomach or bowels. Also, exclude routine circumcision for a newborn baby. It is not necessary to enter these terms in question 7. If operations of this kind are reported, ask 7c before circling "N" in 7a.

⑦ Operations Performed (Continued)

⑦

3 If more than one operation is performed, ask if both were connected with the condition in question 6. If the operation was not performed for the condition recorded in question 6, ask for the name of the condition and record it in question 7 in addition to the name of the operation.

a An acceptable entry would be:

Question 6 - Tonsillitis

Question 7 - Tonsillectomy

or

Question 6 - Goiter

Question 7 - Removal of thyroid gland

b An unacceptable entry would be:

Question 6 - Gallstones

Question 7 - Removed gallbladder and hysterectomy

or

Question 6 - Kidney trouble

Question 7 - Cystoscopy and removal of tumor

In b above, we need to know the reason for the hysterectomy or the site and kind of tumor.

(P2)

Interviewer Check Item P2

(P2)

P2

A Condition page is required if there is an entry of "1" or more nights in 5b. If there is no Condition page, enter condition in item C and fill a page for it after completing columns for all required hospitalizations.

- 1 Item P2 is a reminder to you of when a Condition page is required for a condition reported on the Hospital page.
 - a A condition reported in question 6 or 7 should have a completed Condition page if some part of the hospitalization was during the past two weeks.
 - b If the hospital stay is for delivery and some part of the stay was during the past two weeks, a Condition page should be filled for the mother but not for the newborn baby if he was normal at birth. If he was not normal at birth, a Condition page should be completed for the baby.
- 2 If there is no Condition page for a or b above, enter the condition in item C2 after completing this hospital column and "Hosp." as the source. Then carry the condition(s) through the Condition page after completing columns for all required hospitalizations.

If this condition was described in item 1, question 3a or 18b on a completed Condition page, do not enter it in C2 or fill a separate page.

CHAPTER 7. HOME CARE PAGES

The Home Care pages, pages 34-41 contain a series of questions to relate the health status of the edlerly or physically limited population to other sociodemographic characteristics.

In this section there are instructions to mark the "H" box which appears above each person's column. Whether or not this box is marked will determine if certain questions will be asked about the person.

A. Questions 1-12 on pages 34-39 are asked of all household members.

①

Question 1, Receive or Need Help or Equipment

①

Some people are limited in what they can do because of a physical or mental condition; that is, they cannot do some of the daily activities that other people do.

1a. Because of a disability or health problem, does anyone in the family, (that is you, your --, etc.), receive or need help from another person, or use special equipment in -

If "Yes," ask 1b and c

Person number	Activity	Doesn't do	If "doesn't do," go to next line. Does -- use any SPECIAL EQUIPMENT in (activity)?	Does -- receive or need the help of ANOTHER PERSON in (activity)?	Does -- need help from another person in (activity) most of the time, some of the time, or once in a while?
(a)	(b)	(c)	(d)	(e)	(f)
	(1) Walking, except for using stairs?	<input type="checkbox"/> Doesn't do (Mark H box, THEN TC)	1 Y 2 N	1 Y 2 N (Next line)	1 <input type="checkbox"/> All/most 2 <input type="checkbox"/> Some 3 <input type="checkbox"/> Once 4 <input type="checkbox"/> Never 5 <input type="checkbox"/> Other - Specify
	(2) Going outside?	<input type="checkbox"/> Doesn't do (Mark H box, THEN TC)	1 Y 2 N	1 Y 2 N (Next line)	1 <input type="checkbox"/> All/most 2 <input type="checkbox"/> Some 3 <input type="checkbox"/> Once 4 <input type="checkbox"/> Never 5 <input type="checkbox"/> Other - Specify
	(3) Using the toilet in the bathroom, including getting to the bathroom?	<input type="checkbox"/> Doesn't do (Mark H box, THEN TC)	1 Y 2 N	1 Y 2 N (Next line)	1 <input type="checkbox"/> All/most 2 <input type="checkbox"/> Some 3 <input type="checkbox"/> Once 4 <input type="checkbox"/> Never 5 <input type="checkbox"/> Other - Specify
	(4) Bathing, including sponge baths?	<input type="checkbox"/> Doesn't do (Mark H box, THEN TC)	1 Y 2 N	1 Y 2 N (Next line)	1 <input type="checkbox"/> All/most 2 <input type="checkbox"/> Some 3 <input type="checkbox"/> Once 4 <input type="checkbox"/> Never 5 <input type="checkbox"/> Other - Specify
	(5) Dressing?	<input type="checkbox"/> Doesn't do (Mark H box, THEN TC)	1 Y 2 N	1 Y 2 N (Next line)	1 <input type="checkbox"/> All/most 2 <input type="checkbox"/> Some 3 <input type="checkbox"/> Once 4 <input type="checkbox"/> Never 5 <input type="checkbox"/> Other - Specify
	(6) Eating?	<input type="checkbox"/> Doesn't do (Mark H box, THEN TC)	1 Y 2 N	1 Y 2 N (Next line)	1 <input type="checkbox"/> All/most 2 <input type="checkbox"/> Some 3 <input type="checkbox"/> Once 4 <input type="checkbox"/> Never 5 <input type="checkbox"/> Other - Specify
	(7) Getting in and out of bed or chairs?	<input type="checkbox"/> Doesn't do (Mark H box, THEN TC)	1 Y 2 N	1 Y 2 N (Next line)	1 <input type="checkbox"/> All/most 2 <input type="checkbox"/> Some 3 <input type="checkbox"/> Once 4 <input type="checkbox"/> Never 5 <input type="checkbox"/> Other - Specify

1b. Who is this?

1c. Does anyone else receive or need help or use special equipment in - ?

Question 1 consists of a list of activities which might require the help of another person or the use of a special aid in performing specified activities. This information will enable analysts to classify individuals on a dependency scale ranging from completely independent in daily activities to totally dependent.

①

Receive or Need Help or Equipment (Continued)

①

1. Read the introduction above question 1a once for a family. Then ask question 1a including the parenthetical phrase the first time the question is asked. Wait after each activity for a response before going on to the next activity. When a "yes" response is received to any of the activities, enter a check mark (✓) in the "Yes or doesn't do" column, ask 1b, enter the person's number in column (a) of the table and the number of the activity category in column (b). Then ask 1c. If "Yes" to 1c, reask 1b and c until a final "No" is received to c. If another person receives or needs help or uses special equipment in the same activity, enter the person number and activity number on a separate line of the table. For each activity listed, you will have both the "Yes" and "No" boxes marked or only the "No" box marked, but never the "Yes" box alone. Use the first four lines of the table on page 34 before going to the table on page 35.
 - a. Continue with the list of activities by reasking 1a without the parenthetical phrase until all categories have been asked about.
 - b. If it is volunteered that a family member doesn't do the activity at all, for example, person 1 uses a bedpan all the time and therefore the toilet is not used, mark "Yes or doesn't do." Then enter "1" and "3" in columns (a) and (b) of the table and mark the "Doesn't do" box in column (c) and follow the skip instruction. Otherwise, column (c) will be blank.
2. If questions arise, use the following as a guide:
 - a. "Receive or need help" - requires physical assistance to perform the activity; for example, needs support from another person, must have someone wash the back or turn on the shower, must be fed, etc. Also includes persons who are able to perform the activity without help but must be supervised; for example, someone must be present in case the person falls while bathing.
 - b. "Special equipment" includes equipment or devices used specifically to aid in a particular activity, such as a cane, walker, special spoon or fork. Includes devices installed to aid in the activity, such as rails along the bathtub or toilet, ramps or elevators.
 - c. "Using the toilet in the bathroom" includes adjusting clothes, and cleaning self after using the toilet.
 - d. "Bathing" includes getting or turning on the water for a bath, shower, or sponge bath; getting to, getting in and out of tub or shower, if used washing and drying self.

①

Receive or Need Help or Equipment (Continued)

①

- e. "Dressing" includes putting on braces, getting clothes from closets and drawers, putting them on, fastening buttons, zippers, snaps, etc. However, do not include the occasional need to have someone help with zippers, snaps, etc. that a normally healthy person would have difficulty doing.
 - f. "Eating" includes getting the food from the plate into the mouth. Does not include cutting or otherwise preparing the food.
 - g. "Getting in and out of bed or chairs" includes wheelchairs.
3. Complete columns (d) - (f) of the table after asking the entire list of activities and entering the information in columns (a) and (b). Columns (d) - (f) are not applicable for persons with "doesn't do" marked in (c).

If it is volunteered during the asking of columns (d) - (f) of the table, that the person doesn't do the activity, enter "DD" in that column. For example, you ask column d and the person says he doesn't go outside, enter "DD" in column (d), mark the H box and go to the next line of the table. Note that the "H" box is only marked if the person doesn't do the activity or needs help from another person in performing the activity.

2

Question 2, Personal Activities

2

2a. BECAUSE OF A DISABILITY OR HEALTH PROBLEM, does anyone in the family receive or need help from another person in - If "Yes," ask 2b and c. b. Who is this? c. Does anyone else receive or need help in - ?		Y N	2b. 1 <input type="checkbox"/> Meals 2 <input type="checkbox"/> Shopping 3 <input type="checkbox"/> Chores 4 <input type="checkbox"/> Handling money	Mark "H" Box	
	(1) Preparing their own meals?	<input type="checkbox"/>			<input type="checkbox"/>
	(2) Shopping for personal items, such as magazines, toilet items, or medicines?	<input type="checkbox"/>			<input type="checkbox"/>
	(3) Doing routine household chores, not including yard work?	<input type="checkbox"/>			<input type="checkbox"/>
	(4) Handling their own money?	<input type="checkbox"/>	<input type="checkbox"/>		

1. As in question 1a, the "Y" also includes "doesn't do." However, if it is volunteered that the person doesn't do the activity or doesn't receive or need help in the activity for some reason other than a disability or health problem, for example, "I don't know how to cook, my wife does that," etc. consider this to be a "No" response. When a "Yes" response is received, ask 2b, mark that category in that person's column, and the "H" box, then ask 2c.

2. If questions arise, use the following as a guide:

"Doing household chores" refers to routine chores, such as washing dishes, doing laundry, dusting, sweeping, etc. Heavier or more difficult jobs, such as washing windows or walls, or making repairs to the house are not included.

"Shopping" does not include persons who need help getting to the store but once there can shop without assistance.

"Handling money" includes paying bills, cashing checks, managing accounts, and related activities.

3

Question 3, Usually Stays In Bed

3

3a. Because of a disability or health problem does anyone in the family usually stay in bed all or most of the time? ----- b. Who is this? Mark box in person's column. ----- c. Anyone else?	Y	N (4)	3b. 1 <input type="checkbox"/> Stays in bed (Mark THEN?)
	Y (Reask 3b and c)	N	

If someone in the family usually stays in bed all or most of the time because of a disability or health problem, mark the "Stays in bed" and the "H" boxes in that person's column and ask question 3c. Reask 3b and c until you receive a final "No" in 3c.

4

Question 4, Condition Causing Need for Help

4

<p>Mark box or ask:</p> <p>4a. What (other) condition causes -- to (need help in activities in 1 and 2/(or) stay in bed)?</p> <p>4b. Does any other condition cause -- to (need help in activities in 1 and 2/(or) stay in bed)?</p> <p>Mark box or ask:</p> <p>4c. Which of these conditions would you say is the MAIN condition that causes -- to (need help in activities in 1 and 2/(or) stay in bed)?</p>	<p><input type="checkbox"/> No H box (NP)</p> <p>4a. _____</p> <p>4b. 1 Y (Reason 4a and b) 2 N</p> <p><input type="checkbox"/> Old age only (NP)</p> <p><input type="checkbox"/> Only one condition</p> <p>4c. _____</p> <p>Main condition:</p>
--	--

1. Ask question 4 for each person with the "H" box marked to determine the condition causing the need for assistance or the reason for staying in bed. Substitute the names of all the activities indicated in questions 1 and 2 for this person, and/or include "stay in bed," if "stayed in bed" was marked in question 3. For example, if the person needs help bathing and eating and also stays in bed most of the time ask, "What condition causes you to need help in bathing or eating or to stay in bed?"
2. If the only condition reported in questions 4a and b is "Old age," or if only one condition is reported, mark the appropriate box in 4c without asking the question. Otherwise, ask 4c and enter the main condition as reported. If the respondent is unable to specify the "main condition," enter the response verbatim on the line.
3. If in answer to questions 1-4 you learn the condition is pregnancy, delivery, or an injury which occurred less than three months ago and which did not result in a obvious permanent disability, enter this condition in a footnote. Then reask each question for which this person was reported as receiving or needing help or staying in bed, rewording the questions, for example: "Except for your broken leg, would you need help from another person or use special equipment in walking?"
 - a. If "no," delete that line of the table by drawing a line through all of columns (a) - (f) and footnote the reason.
 - b. However, if the person would still need help or use special equipment in the activity even if the temporary condition was not present, reask the questions in column (d) and (e) on that line of the table if "Y" has been circled saying, for example, "Except for your broken leg, would you need the help of another person in walking?" Also reask the question in column (f).

④ Condition Causing Need for Help (Continued) ④

- c. If any corrections need to be made, enter a footnote to explain the situation. Continue in this manner, reasking about each activity for which the person needs help in questions 1 and 2. Also, reask question 3 if the person was reported as staying in bed.
- d. Delete the "H" box if by reasking the question(s) you find the person no longer receives or needs help or stays in bed.

HC1 ⑤ Interviewer Check Item HC1 and Question 5, Onset of Condition

HC1 ⑤

HC1	Refer to item C2 to determine if a condition page was completed for the main condition in 4. Enter condition page number, or mark box.	HC1	Cond. number (NP) <input type="checkbox"/> No condition page
5.	When did -- first notice his (main condition in 4)?	5.	<input type="checkbox"/> 1 Last week <input type="checkbox"/> 2 Week before <input type="checkbox"/> 3 Past 2 weeks, CK which <input type="checkbox"/> 4 2 weeks - 3 months <input type="checkbox"/> 5 Over 3-12 months <input type="checkbox"/> 6 More than 12 months ago

1. Interviewer Check Item HC1 - After completing question 4c, look at item C2 for this person to see if the main condition in 4c or the condition in 4a was previously reported and has a completed Condition page. If so, enter the condition page number from C2 and go to question 4 for the next person. If not, mark the "No condition page" box and ask question 5.
2. Question 5 - If no condition page was completed for the main condition in 4c or the condition in 4a, ask question 5 to determine the onset of this condition. This question is the same as question 9 on the Condition page. If there are two or more conditions entered in 4c, ask question 5 about each one separately, recording the onsets of each condition in a footnote, for example, "paralysis - box 5," "arthritis - box 6."

If there are multiple conditions and one has a completed Condition page and one does not, enter the page number of the one that was completed in HC1. Then ask question 5 for the one(s) for which no Condition page was completed and record the onset(s) of each condition in a footnote.

NOTE: If you ask question 5, follow the same rules on page 7A-5, paragraph 3 for pregnancy, delivery or an injury which occurred less than 3 months ago.

6 7

Questions 6 and 7, Bowel and Urinary Trouble

6 7

6a. Does anyone in the family have a colostomy, a urinary catheter, or any other device to help control bowel movements or urination? Y N (7)		
b. Who is this? Mark "Device" box in person's column.		6b. 1 <input type="checkbox"/> Device
c. Anyone else? Y (Reask 6b and c) N		
If "Device," ask 6d and e		
d. Which does -- have -- a colostomy, a catheter, or another type of device?		d. 1 <input type="checkbox"/> Colostomy 2 <input type="checkbox"/> Catheter 3 <input type="checkbox"/> Other - Specify <u>7</u>
e. Does -- receive or need help from another person in taking care of his (device in 6d)?		e. 1 Y <small>Mark N box YHE N NP</small> 2 N
7a. (Besides --) Does anyone (else) in the family have any accidents or any trouble controlling their bowel movements or urination? Y N (8)		
b. Who is this? Mark "Trouble controlling" box in person's column.		7b. 1 <input type="checkbox"/> Trouble controlling
c. Anyone else? Y (Reask 7b and c) N		

1. Question 6, Special Device - "Colostomy" and "Urinary catheter" are surgical openings and/or devices used to aid in urination or bowel movements when the person has lost natural control of these functions through illness, disability, surgery, or other causes.
 - a. In 6d, mark the appropriate box and if "Other," specify the kind of device.
 - b. In 6e, "Receives or needs help" means personal assistance or supervision is required or received in operating or cleaning the device, in emptying the bags, etc. Use the "Device" entered in 6d when asking 6e.

2. Question 7. Trouble Controlling Bowel or Urination - If you have marked the "Device" box in 6b for anyone, exclude that person by saying "Besides -- does anyone else in the family ...?"

"Accidents or trouble controlling" includes accidentally wetting or soiling one's self, but does not include occasional slight "leaking." Also, consider people as having "Accidents or trouble controlling" if they must always have enemas because they are unable to empty their bowels. Exclude infants unless it is clear that the trouble is due to a disability or health problem.

Question 8, Special Aids

8

8

8a. Does anyone in the family (that is you, your, -- etc.) now use (any of the following special aids) - If "Yes," ask 8b and c		<table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th style="padding: 2px;">Y</th> <th style="padding: 2px;">N</th> </tr> </thead> <tbody> <tr><td style="padding: 2px;">(1)</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">(2)</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">(3)</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">(4)</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">(5)</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">(6)</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">(7)</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">(8)</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">(9)</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">(10)</td><td style="padding: 2px;"></td></tr> </tbody> </table>	Y	N	(1)		(2)		(3)		(4)		(5)		(6)		(7)		(8)		(9)		(10)	
Y	N																							
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(6)																								
(7)																								
(8)																								
(9)																								
(10)																								
(1) An artificial arm? (2) An artificial leg? (3) A brace of any kind? (If "Yes," ask: On what part of the body is the brace worn?) (4) Crutches? (5) A cane or walking stick? (6) Special shoes? (7) A wheel chair? (8) A walker? (9) A guide dog? (10) Any other kind of aid for getting around?	8b. 1 <input type="checkbox"/> Artificial arm 2 <input type="checkbox"/> Artificial leg 3 <input type="checkbox"/> Brace - Part of body <i>Z</i> <hr/> 4 <input type="checkbox"/> Crutches 5 <input type="checkbox"/> Cane or walking stick 6 <input type="checkbox"/> Special shoes 7 <input type="checkbox"/> Wheel chair 8 <input type="checkbox"/> Walker 9 <input type="checkbox"/> Guide dog 10 <input type="checkbox"/> Other - Specify <i>Z</i>																							
b. Who is this? Mark box in person's column. c. Anyone else?																								

1. Question 8 consists of a list of special aids one might use to help in getting around or performing certain activities. Wait for a "Yes" or "No" reply to each aid before reading the next category. Use the parenthetical phrase the first time you read question 8a.
 - a. When a "Yes" response is received to any of the aids, enter a check mark (✓) in the "Yes" column, ask 8b, mark the type of aid in that person's column and ask 8c. Repeat 8b and c, repeating the sequence until a final "No" is received to c. Continue by asking 8a without the parenthetical phrases until all categories have been asked.
 - b. For each category listed, you will have both the "Yes" and "No" boxes marked or only the "No" box marked, but never the "Yes" box alone.

2. If questions arise, "Artificial arm" and "Artificial leg" includes artificial hand or foot. Consider this as a "Yes" response and footnote this information.
 - a. "Brace of any kind" does not include braces for teeth or braces or trusses for hernias. If "Brace" is reported, ask "On what part of the body is the brace worn?" and enter the part of body on the line provided. Then reword 8c to "Does anyone else now use a brace of any kind?"
 - b. "Special shoes" are shoes of special construction or design which are used to help the person in getting around. Oversized shoes purchased because of corns, bunions, etc. should not be included.

9 10

Questions 9 and 10, Other Aids and Help

9 10

<p>9a. Does anyone in the family use - If "Yes," ask 9b and c</p> <p>b. Who is this? Mark box in person's column</p> <p>c. Anyone else?</p>	<table border="1"> <tr> <td></td> <td>Y</td> <td>N</td> </tr> <tr> <td>(1) Eyeglasses?</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>(2) Contact lenses?</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>(3) A hearing aid?</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		Y	N	(1) Eyeglasses?	<input type="checkbox"/>	<input type="checkbox"/>	(2) Contact lenses?	<input type="checkbox"/>	<input type="checkbox"/>	(3) A hearing aid?	<input type="checkbox"/>	<input type="checkbox"/>	<p>9a. 1 <input type="checkbox"/> Eyeglasses 2 <input type="checkbox"/> Contact lenses 3 <input type="checkbox"/> Hearing aid</p>			
	Y	N															
(1) Eyeglasses?	<input type="checkbox"/>	<input type="checkbox"/>															
(2) Contact lenses?	<input type="checkbox"/>	<input type="checkbox"/>															
(3) A hearing aid?	<input type="checkbox"/>	<input type="checkbox"/>															
<p>10a. Does anyone in the family receive help here at home with - If "Yes," ask 10b and c</p> <p>b. Who is this? Mark box in person's column</p> <p>c. Anyone else?</p>	<table border="1"> <tr> <td></td> <td>Y</td> <td>N</td> </tr> <tr> <td>(1) Receiving injections or shots?</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>(2) Physical therapy?</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>(3) Changing bandages?</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>(8) Any other nursing or medical treatments?</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		Y	N	(1) Receiving injections or shots?	<input type="checkbox"/>	<input type="checkbox"/>	(2) Physical therapy?	<input type="checkbox"/>	<input type="checkbox"/>	(3) Changing bandages?	<input type="checkbox"/>	<input type="checkbox"/>	(8) Any other nursing or medical treatments?	<input type="checkbox"/>	<input type="checkbox"/>	<p>10b. 1 <input type="checkbox"/> Injections 2 <input type="checkbox"/> Physical therapy 3 <input type="checkbox"/> Bandages 8 <input type="checkbox"/> Other - Specify</p>
	Y	N															
(1) Receiving injections or shots?	<input type="checkbox"/>	<input type="checkbox"/>															
(2) Physical therapy?	<input type="checkbox"/>	<input type="checkbox"/>															
(3) Changing bandages?	<input type="checkbox"/>	<input type="checkbox"/>															
(8) Any other nursing or medical treatments?	<input type="checkbox"/>	<input type="checkbox"/>															

Complete questions 9 and 10 in the same manner as question 8. In question 10 do not include treatments received because of a temporary acute condition, if this information is volunteered. For example, do not include a child who needs someone to change bandages because of a cut. However, do not probe for this information.

11

Question 11, Received Meals at Home

11

<p>11a. During the past 12 months, (that is since 12/31 of the year ago) has anyone in the family received MEALS that were prepared outside the home and brought in on a fairly regular basis?</p>	<p>Y N (12)</p>
<p>b. Who received the meals? Mark "Meals" box in person's column.</p> <p>c. Anyone else?</p>	<p>11b. <input type="checkbox"/> Meals</p> <p>Y (Reask 11b and c) N</p>
<p>d. Does -- NOW regularly receive meals that are prepared outside the home and brought in?</p>	<p>d. 1 Y 2 N (NF)</p>
<p>e. What agency, organization, or program provides these meals for --?</p>	<p>e. _____</p>

In this question we are interested in meals provided for any reason, not just health-related reasons. Do not include receiving restaurant carry-out food, regardless of the reason or frequency. In 11e try to obtain the complete name of the agency, organization or program. If the respondent says that the meals were provided by someone else, enter this information in the answer space.

12

Question 12, Care at Home from a Nurse

12

12a. During the past 12 months, has anyone in the family received any care at home from a nurse? Exclude related HH members.	Y	N (IHCP)	
b. Who received the care? Mark "Nurse" box in person's column.			12b. <input type="checkbox"/> Nurse
c. Anyone else?	Y (Revol 12b and c)	N	

- "Care at Home" refers to visits by nurses to the person's residence to provide medical treatment or assistance in daily activities, or as a check to see if the person is all right. "Home" refers to any place the person was staying at the time of the visit, such as the person's own home, the home of a friend, a hotel room, etc.
- "Nurse" includes registered nurses (RN), practical nurses (LPN), private duty nurses, public health nurses, etc. However, for this question do not include a related household member who is a nurse.

- B. The statistics from the Individual Home Care page, pages 40 and 41, will help in planning a variety of programs to help dependent persons financially, improve transportation facilities for the handicapped or to provide telephone callers or visitors to persons who don't use the telephone or rarely see anyone socially.

①

Question 1, Person Number

①

1. Person number

Complete a separate column for each person with the "H" box marked, beginning with the first listed person and continuing for any remaining persons with the "H" box in the order listed on the questionnaire. Be sure to enter the correct person number in item 1. If there are more than four "H" box persons in the family, use additional questionnaires.

②

Question 2, Who Helps Person

②

<p>2a. Earlier you said that -- receives or needs the help of another person. Who helps --? (Is -- helped by anyone who lives here, by any other friends or relatives, a nurse, or any other health care professionals who come into the home, or is -- helped by someone else?)</p> <p>-----</p> <p>b. Does anyone else help --?</p>	<p>2a. <input type="checkbox"/> 1. Related household member <input type="checkbox"/> 2. Nurse <input type="checkbox"/> 3. Other health worker - Specify _____ <input type="checkbox"/> 4. Other relatives or friends <input type="checkbox"/> 5. Other - Specify _____</p> <p>b. <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
---	---

1. Include the parenthetical statement the first time you ask question 2 and at any other time you feel the respondent has difficulty in answering the question. Mark all applicable categories.
2. The type of health worker must be specified, for example, doctor, physical therapist, etc.; and if "Other" is marked, these persons must also be specified, for example, charities, paid companions, housekeepers, baby sitters, etc. If the respondent reports more than one type of health worker or "Other" helper, record all of the types mentioned.
3. If you learn the nurse or health worker is also a related household member, mark box 1. If the nurse or health worker is also a relative who does not live in the household, mark the "Nurse" or "Other health worker" box.

When reasking 2a, ask "Who helps --?"

3

Question 3, Help from Nurse

3

If "Nurse" in Q. 2, use:	
3a. On the average, how many days per week does the nurse visit --?	3a. _____ Days per week
b. When the nurse visits, how many hours per day does he or she usually spend helping --?	b. <input type="checkbox"/> Less than 1 hour _____ Hours
c. Does anyone in the family, that is you, your --, etc. pay any part of the cost for the nurse?	c. <input type="checkbox"/> Y <input type="checkbox"/> N
d. Does any government agency or program help pay for the nurse?	d. <input type="checkbox"/> Y <input type="checkbox"/> N (If Y)
e. What agency or program helps pay?	e. <input type="checkbox"/> Medicare <input type="checkbox"/> Medicaid <input type="checkbox"/> Health Insurance <input type="checkbox"/> Other - Specify _____
f. During the past 2 weeks, how many times was -- visited by the nurse?	f. _____ Number of times

1. Ask question 3 if "nurse" was marked in Q.2 to determine the amount of time the nurse spends with the person and the method of payment.
2. In questions 3a and b, if the respondent cannot provide an answer, an estimate is acceptable. Include all time spent on duty even if the nurse was not actually "helping" the person. If you learn the nurse is a household member, obtain the best estimate of the on duty time and footnote "household member." For nurses who live in but are not household members:
 - (1) Determine the amount of on duty hours,
 - (2) Enter "lives in" and the amount of time spent in the household in a footnote.

For example, a nurse lives in 3 days a week but is on duty only 8 hours per day. Enter "8 hours" in the answer space and footnote "lives in 3 days per week."
3. In questions 3d and e, do not suggest any of the specified answers to the respondent. If any of these are reported, mark the appropriate box; otherwise, record verbatim any "Other" response. However, you may mark the "Medicaid" box when the response given you is an alternative name listed for that State on the "State names for Medicaid" flashcard.

Question 4, Help from Other Health Workers

4

4

If "Other health worker" in 2a, asc.	
4a. On the average, how many days per week does the (other health worker) visit ---?	4a. _____ Days per week
b. When the (other health worker) visits, how many hours per day does he or she usually spend helping ---?	b. 00 <input type="checkbox"/> Less than 1 hour _____ Hours
c. Does anyone in the family, that is you, your ---, etc. pay any part of the cost for the (other health worker)?	c. 1 <input type="checkbox"/> Y 2 <input type="checkbox"/> N
d. Does any government agency or program help pay for the (other health worker)?	d. 1 <input type="checkbox"/> Y 2 <input type="checkbox"/> N (if)
e. What agency or program helps pay?	e. 1 <input type="checkbox"/> Medicaid <input type="checkbox"/> Other - Specify _____ 2 <input type="checkbox"/> Medicare 3 <input type="checkbox"/> Health insurance
f. During the past 2 weeks, how many times was --- visited by the (other health worker)?	f. _____ Number of times

Ask question 4 if "Other health worker" is marked in 2a. Insert the type(s) of health worker(s) entered in 2a, for example, "On the average, how many days per week does the therapist visit you?" Include all health workers reported and record the total time and source of payment for all without attempting to separate them. Complete this question in the same manner as question 3.

HC2

5 7

Interviewer Check Item HC2 and
Questions 5-7, Selected Personal Activities

HC2

5 7

HC2	HC2: 1 <input type="checkbox"/> Under 17 (NP) 2 <input type="checkbox"/> 17+
5a. Does --- receive or need help from others in using public transportation, such as buses, trains, subways, or planes?	5a. 1 <input type="checkbox"/> Y (6) 2 <input type="checkbox"/> N 4 <input type="checkbox"/> Doesn't use (5c)
b. Does --- use public transportation?	b. 1 <input type="checkbox"/> Y (6) 2 <input type="checkbox"/> N
c. If --- had to use public transportation, would --- need the help of other persons?	c. 1 <input type="checkbox"/> Y 2 <input type="checkbox"/> N
6a. Does --- drive a car?	6a. 1 <input type="checkbox"/> Y (7) 2 <input type="checkbox"/> N
b. Does --- not drive a car because of --- disability or health problem or because of some other reason?	b. 1 <input type="checkbox"/> Age 2 <input type="checkbox"/> Disability 3 <input type="checkbox"/> Other
7a. Does --- use the telephone without the help of another person?	7a. 1 <input type="checkbox"/> Y (8) 2 <input type="checkbox"/> N
b. Would --- be able to use the telephone in an emergency?	b. 1 <input type="checkbox"/> Y 2 <input type="checkbox"/> N

Ask questions 5-10 for each person for whom you have marked the 17+ box in item HC2.

5 7 Selected Personal Activities (Continued)

5 7

1. Include in question 5 all types of public transportation, regardless of how often it is used. For example, if a person needs help in using a wheelchair to board an airplane, consider this as a "Yes" response.
2. In question 6, if the reason for not driving is related to the person's health or disability or old age only, mark the appropriate box. For other reasons mark the "Other" box. If the respondent reports reasons which fall in two or more of these categories probe by asking for the MAIN reason the person does not drive.
3. In question 7, the telephone does not have to be the person's own as long as the individual is physically able to use one.

8 10

Questions 8—10, Other Personal Activities

8 10

8a. During the 2 weeks outlined in red on the calendar, did -- have any visits from a friend, relative or neighbor?	8a.	1 Y	2 N (8c)
8b. How many times during that period was -- visited by friends, relatives or neighbors? (Was it 3 or more times or less than 3 times?) (Was it 12 or more times or less than 12 times?)	8b.	1 <input type="checkbox"/> 1-3 times 2 <input type="checkbox"/> 4-12 times	3 <input type="checkbox"/> 13+ times
8c. During these 2 weeks, did -- go out to visit a friend, relative or neighbor?	8c.	1 Y	2 N (9)
8d. How many times during that period did -- go out to visit friends, relatives or neighbors? (Was it 3 or more times or less than 3 times?) (Was it 12 or more times or less than 12 times?)	8d.	1 <input type="checkbox"/> 1-3 times 2 <input type="checkbox"/> 4-12 times	3 <input type="checkbox"/> 13+ times
9. During the past 12 months, did -- go on a vacation?	9.	1 Y	2 N
10. Because of a disability or health problem, how often must someone be here with --, most of the time, some of the time, once in a while or never?	10.	1 <input type="checkbox"/> Most/All 2 <input type="checkbox"/> Some 3 <input type="checkbox"/> Once	4 <input type="checkbox"/> Never 5 <input type="checkbox"/> Other - Specify <i>x</i>

1. Use the probe below questions 8b and d if the respondent hesitates in giving an answer. Question 8c includes meeting a friend, relative or neighbor and going out to do something together.
2. Do not attempt to define "vacation" for the respondent in question 9. Question 10 is self-explanatory.

CHAPTER 8. IMMUNIZATION PAGE

The Immunization Page consists of questions to obtain information concerning immunization against various childhood diseases for persons under 17.

In recent years the number of cases of these diseases have increased, partly due to the belief that they have been eradicated and present little danger to children. To provide adequate protection against the serious consequences of these diseases, statistics are needed to help plan programs to inform the public and provide immunization services.

In this survey, "shot" refers to the vaccine for a particular disease, not the actual needle prick. For example, a child could receive vaccinations for mumps, red measles and rubella all in one "shot," but this would be counted as three separate shots.

Since several different types of shots may be received at the same time, the respondent may have difficulty identifying which shots were received. In such cases, encourage the use of records and/or consultation with other family members who may be able to provide the information.

Interviewer Check Item S

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
										1 = Under 17 2 = 17+ (M)									

Mark a box in item S in each person's column. Ask questions 1-7 as a block for each person under 17 years of age.

Question 1, DPT Shot

1a. Since the first of (hospital probe month) 1979, has -- received a DPT shot? -- A DPT shot is to prevent diphtheria, tetanus, and pertussis or whooping cough.	1a. 1 Y 2 N (2) 3 DK (2)
b. When did -- receive the DPT shot?	b. Mo. _____ Date _____
c. Where did -- receive the DPT shot -- at a clinic, hospital, school, doctor's office, or some other place? If clinic: Was it a hospital outpatient clinic, a company clinic, a public health clinic or some other kind of clinic? 1 - Doctor's office (Group practice or doctor's clinic) 2 - Public Health Clinic 3 - Other - Specify _____ 4 - Hospital outpatient clinic or emergency room 4 - School	c. 1 2 3 4 5 6 7 _____

Ask question 1a to determine if the person received a DPT shot during the reference period which is the first of the month preceding the month in which Monday of interview week falls. Notice that the date is the same as the one used for the hospital probe. For example, if you are interviewing March 15, 1979, say "Since the first of February 1979..." Refer the respondent to the calendar as often as you feel it necessary.

DPT, or DTP as it was formerly called, is the same type of shot. Circle "Y," if a person received either a DTP or a DPT shot.

Circle "Y" for persons who received in a single injection, a combination of the diphtheria, tetanus, and pertussis vaccine. Pertussis

①

Question 1, DPT Shot (Continued)

①

is commonly known as whooping cough and tetanus is sometimes referred to as lockjaw. Also, circle "Y," if the single injection contained the DPT combination of vaccines plus other vaccines.

If the child received a tetanus shot without diphtheria and pertussis or a diphtheria or pertussis shot without the others, do not count this as a DPT shot. Reask the question including the explanation if necessary.

Enter a footnote about these types of shots received and go to question 2.

If, in recording the date in 1b and subsequent questions, you learn the shot was received outside the reference period (either before the hospital probe date or during interview week), reask the question and make any necessary corrections.

Ask question 1c to determine where the shot was received and circle the number in that person's column that corresponds to the place given. No probe is necessary for a response of "hospital," circle "2." Also do not probe for "Public Health Clinic." However, if a response of "clinic" is received, use the probe printed below the question. Circle "8" and write in any response that does not fit into one of the pre-printed categories, for example, "Community Health Clinic."

②

Question 2, Polio Shot or Vaccine

②

2a. Since the first of (hospital probe month) 1979, has -- received a polio shot or polio vaccine by mouth?	2a. 1 Y 2 N (3) 3 OK (3)
b. Was it a shot or did -- receive the vaccine by mouth?	b. 1 <input type="checkbox"/> Vaccine by mouth 2 <input type="checkbox"/> Shot
c. When did -- receive the polio (vaccine/shot)?	c. Mo. _____ Date _____
d. Where did -- receive the polio (vaccine/shot) - at a clinic, hospital, school, doctor's office, or some other place? If clinic: Was it a hospital outpatient clinic, a company clinic, a public health clinic or some other kind of clinic? 1 - Doctor's office (Group practice or doctor's clinic) 3 - Public health Clinic 8 - Other - Specify 2 - Hospital outpatient clinic or emergency room 4 - School	d. 1 2 3 4 5 7 _____ (Specify)

Ask question 2a in the same manner as question 1a.

Polio vaccine may be received by shot or by mouth. Oral polio vaccine is given in drops on sugar cubes, in flavored syrup, or by medicine drops placed on the tongue.

Mark the appropriate box in 2b according to the response given. When asking 2c and d, select the appropriate word in parentheses according to the box marked in 2b and complete in the same manner as 1b and c.

3

Question 3, Mumps Shot

3

3a. Since the first of (hospital probe month) 1979, has -- received a mumps shot?	3a. 1 Y 2 N (4) 3 DK (4)
b. When did -- receive the mumps shot?	b. Mo. _____ Date _____
c. Where did -- receive the mumps shot -- at a clinic, hospital, school, doctor's office, or some other place? If clinic: Was it a hospital outpatient clinic, a company clinic, a public health clinic or some other kind of clinic? 1 - Doctor's office (Group practice or doctor's clinic) 3 - Public Health Clinic 8 - Other - Specify 2 - Hospital outpatient clinic or emergency room 4 - School	c. 1 2 3 4 8 7 _____ (Spec.)

Complete question 3 in the same manner as questions 1 and 2. The mumps vaccine may have been injected alone or in combination with other vaccines.

4 - 5

Questions 4 and 5, Measles Shot

4 - 5

<p>There are two basic types of measles for which shots can be received: German measles, sometimes known as Rubella or 3-day measles AND Red measles, sometimes known as 8-day measles.</p>	
4a. Since the first of (hospital probe month) 1979, has -- received any kind of measles shot? b. What types of measles shots did -- receive? (Was it for German measles, sometimes known as Rubella or 3-day measles, OR was it for Red measles, sometimes known as 8-day measles, OR did -- receive shots for both?)	4a. 1 Y 2 N (NP) 3 DK (NP) b. <input type="checkbox"/> Both Red and German (6) <input type="checkbox"/> Red measles (8-day) only <input type="checkbox"/> German measles (Rubella, 3-day) only <input type="checkbox"/> DK kind
5a. When did -- receive the measles shot? b. Where did -- receive the measles shot -- at a clinic, hospital, school, doctor's office, or some other place? If clinic: Was it a hospital outpatient clinic, a company clinic, a public health clinic or some other kind of clinic? 1 - Doctor's office (Group practice or doctor's clinic) 3 - Public Health Clinic 8 - Other - Specify 2 - Hospital outpatient clinic or emergency room 4 - School	5a. Mo. _____ Date _____ b. 1 2 3 4 8 7 } NP _____ (Spec.)

Read the introduction above question 4a once to inform the respondent of the different types of measles. Respondents may be somewhat confused by this question since there are 2 types of measles that are known by different names. Rubella is sometimes called German or 3 day measles. Red measles are sometimes called 8-day measles.

Ask questions 4 and 5 in the same manner as previous similar questions.

When asking question 4b include the parenthetical statement whenever you feel the respondent doesn't understand the different types of measles. The measles vaccines may be received alone or in combination with each other or with some different vaccine. Be sure the correct type of shot is recorded in 4b. Mark "Both Red and German" if both vaccines were received during the reference period.

④ ⑤ Questions 4 and 5, Measles Shot (Continued)

④ ⑤

Ask question 5 if the person received a vaccination for only one type of measles, "Red," "German," or "DK kind." If the person received two shots but the respondent doesn't know what kind either one was, ask about the first shot in question 5 and footnote the date and place of the second shot.

If more than one shot was received, one known and the other unknown, mark the box for the known type, and ask about this shot in question 5. Then footnote "2nd shot, DK type," also footnote the date and place of that DK shot.

⑥ ⑦

Question 6 and 7, Red or German Measles

⑥ ⑦

<p>6a. When did -- receive the shot for Red measles, sometimes known as 8-day measles?</p> <p>b. Where did -- receive this shot -- at a clinic, hospital, school, doctor's office, or some other place? If clinic: Was it a hospital outpatient clinic, a company clinic, a public health clinic or some other kind of clinic? 1 - Doctor's office (Group practice or doctor's clinic) 3 - Public Health Clinic 8 - Other - Specify 2 - Hospital outpatient clinic or emergency room 4 - School</p>	<p>6a. Mo. _____ Date _____</p> <p>b. <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 8 <input checked="" type="checkbox"/> 7</p> <p>_____ (Specify)</p>
<p>7a. When did -- receive the shot for German measles, sometimes known as Rubella or 3-day measles?</p> <p>b. Where did -- receive this shot -- at a clinic, hospital, school, doctor's office, or some other place? If clinic: Was it a hospital outpatient clinic, a company clinic, a public health clinic or some other kind of clinic? 1 - Doctor's office (Group practice or doctor's clinic) 3 - Public Health Clinic 8 - Other - Specify 2 - Hospital outpatient clinic or emergency room 4 - School</p>	<p>7a. Mo. _____ Date _____</p> <p>b. <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 8 <input checked="" type="checkbox"/> 7</p> <p>_____ (Specify)</p>

Ask questions 6 and 7 in the same manner as previous similar questions if the person received BOTH the Red and German measles shots as reported in question 4b.

CHAPTER 9. EYE CARE PAGE

The information on the Eye Care page is being collected to make estimates of the number of visits to providers of eye care as well as to relate other social, demographic and health characteristics collected on the HIS to the volume of visits.

Each page is designed similar to the Condition page. Complete the Eye Care page for each sample person regardless of age beginning with the first sample person listed. If there are more than two sample persons in the family, use additional questionnaires.

① (E1)

Items 1 and E1, Person Number and Status of Sample Person

① (E1)

Complete for each SP (19+: Self; 17-18: Self or parent; Under 17: Parent) EYE CARE PAGE		
1. Person number	E1	Refer to Flashcard Booklet
		1 <input type="checkbox"/> Callback required (Next SP) 2 <input type="checkbox"/> Eligible resp. available

- 1 The statement above items 1 and E1 can be used as a guide during the initial interview to determine the correct respondent.
- 2 Person Number - Write in the number of the sample person for which this particular Eye Care page is being filled.
- 3 Status of Sample Person - Refer to the Information Card Booklet and mark the appropriate box in item E1. A proxy respondent is acceptable during the initial interview for sample persons under 19 and for persons 17+ who are mentally or physically incompetent or will not be available during the interview period. If a sample person 19+ is not available during the initial interview, arrange to make a telephone callback and footnote this information on the household page.
 - a. Use the following guide to determine the eligible respondent for each sample person.

Contact	If SP is aged	Then the eligible respondent for the EYE CARE PAGE is ...
Initial visit and first telephone contact	19+	SP*
	17-18	SP* or parent/guardian*
	Under 17	Parent/guardian*
Second telephone contact	19+	SP or original household respondent or other eligible respondent 19+.
	17-18	SP or parent/guardian or original household respondent or other eligible respondent 19+.
	Under 17	Parent/guardian or original household respondent or other eligible respondent 19+.

*SPECIAL CASES:

If the eligible respondent

- is mentally or physically incompetent to respond,
OR
- will not be available during interview period,
OR
- (for SP's under 19) There is no parent or legal guardian living in the household,

then accept the household respondent as the proxy during the initial interview. No callback is necessary.

If at the time of the initial interview a 45 year old sample person is not at home and he is not at home at the time of your first telephone contact. When you reach the household again, you are told by his 20 year old son that the father will not be home but he can answer the questions for you. In item 20 of the Household page, you will have circled "Y" in the "Eye Care Required" column and entered "1" (for the father) in the "Preferred Respondent for Eye Care" column. In item 21 you will enter "1" in the "EC" column.

- b. On the first telephone contact, ask to speak to the person listed in the "Preferred Respondent" column in item 20 of the Household page.
- c. On the second telephone contact if the sample person or the preferred respondent is still not available, select a proxy in the order specified in paragraph 2a.

① (E1)

① (E1)

Person Number and Status of Sample Person (Continued)

- d. If you can be sure of reaching the sample person or the appropriate respondent on a later call, then make as many calls as are required before taking a proxy respondent. "Contacts" include actually talking to someone in the household, not wrong numbers, busy signals, etc.

② ③

Questions 2 and 3, Eye Care Visits in Past Year

② ③

When people need help or advice about their eyes they go to their regular doctor or someone else who takes care of the eyes. Eye care includes examinations, treatments, and surgery. It also includes fitting or adjusting of contact lenses. Eye care does NOT include visits which were only for adjusting frames.

2. Since (12-month date) a year ago, has -- visited a doctor, eye specialist, or someone else for any type of eye care? Please count times a doctor examined --'s eyes even if the visit was not made only for this purpose.

1 Y
2 N (E3)

3. How many total times since (12-month date) a year ago, has -- visited someone for eye care?

None (E3)
Number

- 1 Read the introduction above question 2 to define the term "eye care" and to inform the respondent of the kinds of questions you will be asking. If you complete two Eye Care pages, it is not necessary to read the introduction the second time. However, the instruction must be read if the person was not present the first time you read it.
- 2 Ask questions 2 and 3 to determine if the person saw an eye care provider since the date specified and if so, how many times. "Doctor or eye specialist" refers to any kind of eye care provider. This includes M.D.'s, whether or not the specialty is eye care, as well as non-medical practitioners who provide eye exams or eye care. Use the reference date in the 12 months Bed days and Doctor Visit probe of Item C. Refer the respondent to the calendar as often as you feel it necessary. Make any necessary corrections if you discover the visit(s) was made outside the reference period, that is before the 12 month date or during interview week.
- 3 Do not count taking a prescription to be filled or picking up glasses or prescriptions as visits. Count only visits as defined in the introduction.
- 4 If a person receives multiple services during the same visit, for example an eye examination and fitting of glasses, count this as one visit.

4

Question 4, Eye Care Visits in Past Month

4

4. How many times did -- visit someone for eye care since the first of (hospital probe month), 1979?	<input type="checkbox"/> None (E3) Number
--	--

Use the date in the Hospital probe reference date of item C and the current year. For example, if you are interviewing in January of 1979 you would use December 1978. Otherwise, you would use the date entered in item C and 1979.

5

Question 5, Details of Eye Care Visit

5

5a. On what date did -- visit someone for eye care (the last time)?		Month	Date	OR	<input type="checkbox"/> 1979 Last week <input type="checkbox"/> 1978 Week before
b. Where did -- go for that visit -- to a doctor's office, an optical store, or some other place?		<input type="checkbox"/> 1 Doctor's office (group practice or doctor's clinic) <input type="checkbox"/> 2 Optical store <input type="checkbox"/> Other - Specify ?			
c. What is the (name and) address of this (place in 5b)?		Name _____ Street _____ City _____ State _____			
d. Who did -- see at the (place in 5b) on that visit?		Name _____ Spec. code _____			
e. Is (person in 5d) an ophthalmologist, an optometrist, an optician, or some other kind of doctor or specialist?		<input type="checkbox"/> 1 Ophthalmologist (Oculist) <input type="checkbox"/> 2 Optometrist <input type="checkbox"/> 3 Optician <input type="checkbox"/> Other - Specify ? } E2			
f. Is this person a medical doctor?		<input type="checkbox"/> 1 Y <input type="checkbox"/> 2 N <input type="checkbox"/> 9 DK			

1. If in recording the date of the visit, you learn the visit actually took place outside the reference period, (either before the hospital probe date or during interview week), reask the question and make any necessary corrections. Include the parenthetical phrase "the last time" when asking question 5a if more than 1 visit is reported in 4 so that you will obtain information for the most recent visit first. An estimate of the date is acceptable, but use the calendar card to help the respondent recall the date as closely as possible. If this cannot be done, determine the week and mark the "Last week" or "Week before" box.

⑤ Details of Eye Care Visit (Continued)

⑤

- 2 In question 5b, the definition of "Doctor's Office" is the same as that used in other similar questions. Do not attempt to define "Optical store." Mark "Other" and specify the type of place for any response that will not fit into categories 1 or 2, for example, health center, department store, etc. If the person says "the optical department at Sears," mark "Other" and enter the response verbatim. Do not convert this to "Optical Store."
- 3 When asking 5c, omit the parenthetical phrase "name and" if "Doctor's office" was marked in 5b. Insert the name of the place entered in 5b.
- 4 In question 5d, obtain as complete a name as possible since this information will be used to verify the provider's specialty. You will complete the "Specialty code" box after the interview.
- 5 When asking 5e, if there is no name entered in 5d, ask "Is this person an ...? Do not define any of the terms for the respondent. If the respondent volunteers some kind of documentation such as a business card or a bill for the specialist seen or offers the telephone directory you may get the necessary information from these sources. In these cases, mark the appropriate box in 5e, and then you may enter the specialty code, if clear, in 5d. Only if the card, bill, or telephone book clearly states that the person is an ophthalmologist, optometrist, or optician, may the specialty code be entered at this time. In all other cases, follow the rules for the "Specialty Code," below. Even if the documentation states that the provider is some other type of specialist you must still follow these rules because he/she may also be an eye care specialist.
- 6 Ask 5f if "Other" was marked in 5e.

Interviewer Check Item E2 and Question 6

⑥ E2

⑥ E2

E2		
	<input type="checkbox"/> visits in 3	<input type="checkbox"/> Other (F3)

- 1 Look at question 3, mark the appropriate box in item E2 and follow the indicated skip instruction.
- 2 Ask question 6 concerning the person's previous visit in the same manner as question 5.

(E3)

Item E3, Respondent

(E3)

E3	a. MARK FIRST APPROPRIATE BOX.	1 <input type="checkbox"/> Under 17 2 <input type="checkbox"/> Present for all questions 3 <input type="checkbox"/> Present for 1+ questions 4 <input type="checkbox"/> Not present
	b. ENTER PERSON NUMBER(S) OF PERSON WHO RESPONDED	_____ <small>Person no. of respondent(s)</small>

In E3, mark the first applicable box, depending on the sample person's age and whether or not this person was present during the interview and enter the person number(s) of all persons who responded for this page. Footnote the reason a proxy was accepted.

(SC)

Specialty Codes

(SC)

SPECIALTY CODES	1-Ophthalmologist	3-M.D. - DK type
	2-Optomtrist	6-Not an M.D.
	3-Optician	7-OK if M.D.
	4-M.D. - not ophthalmologist	

1 After the day's interviewing, look up the name reported in 5d and/or 6d in the telephone directory for the area reported in 5c and for 6c. In some areas, the yellow pages have physicians listed by specialty. If it is clear from the entry in the directory that the person is an ophthalmologist, optometrist, or optician, enter the appropriate "Spec. code" in the box provided in 5d/6d using the codes listed at the bottom of the page.

If it is not clear that the person is one of these specialists, call the number listed in the directory. Even if the person is listed in the directory as something other than one of these specialists you must still call because the person might also be one of these specialists. If the person is not one of these three specialists, be sure to find out if he/she is an M.D.

SC Specialty Codes (Continued)

SC

- 2 If the person entered in 5d/6d is not listed in the phone directory but there is a name of a place entered in 5c/6c, call this place and ask for the specialty of the person in 5d/6d.
- 3 When calling for information about the specialty, ask, "Is (name in 5d) an ophthalmologist, optometrist, optician, or something else?" If the person is not one of these types of specialists but is "Something else," ask "What is (name)?" If it is still not clear, ask, "Is (name) an M.D.?" In order to obtain this information it usually will not be necessary to identify yourself or to explain why you are calling. However, if you must give some information remember that you may not mention the sample person's name or the Health Interview Survey, just say that you are conducting a health survey for the NCHS so that estimates can be made of the number of visits to each type of eye care provider.
- 4 In some cases in which "optical store" was marked in 5b/6b, the name and address of the place may be entered in 5c/6c but no name was entered for the person seen at the store. In such instances, it may be possible to determine the types of specialists employed at the store. Call the store and ask:

"Are any ophthalmologists employed at your store at (address in 5c/6c)?
Any optometrists?
Any opticians?
Are there any other persons who give vision examinations or eye treatments?"

Each part must be asked, regardless of the answers to the previous questions, in order to be sure of the types of specialists employed.

Use the instructions in f) (below) to assign the specialty code for these cases.

- 5 When entering the specialty codes, use the following procedures:
 - a) Assign code "1-ophthalmologist," "2-optometrist," or "3-optician" if it is clear from the directory listing or your telephone inquiry that the person is one of these types of specialists.
 - b) Assign code "4-M.D. - not an ophthalmologist" if, when you call, you are told that the person is an M.D. and a specialty other than ophthalmology is reported to you. Code 4 also applies to M.D.'s who are general practitioners or family doctors. It must be clear before assigning this code that the specialist is not also an ophthalmologist.
 - c) Assign code "5-M.D. - DK type" if, when you call, it is clear that the person is an M.D. but you cannot determine the speciality over the telephone.

SC Specialty Codes (Continued)

SC

- d) Assign code "6-not an M.D." if, after calling, it is clear that the person is not an optometrist, optician, or any kind of M.D. It is impossible to obtain this information from a phone directory listing alone. The fact that the telephone directory does not say "physician" or "M.D." does not mean that the person is not one.
- e) Assign code "7-DK if M.D." if the necessary information is not available in the directory and the person or place cannot be reached on the telephone or the person answering the telephone is not able to provide the necessary information. Assign this code only as a last resort and footnote the reason you were unable to obtain any more information.
- f) When calling a store about the type of specialists employed for cases in which no name was provided in 5d/6d, assign the specialty code in the following manner.

If the response to the probe questions indicates that there is only one type of specialist employed at the store (that is, "no" to the last question about "other persons" and "yes" to ONLY ONE of the first three probes), code 1, 2, or 3 as appropriate. For all other cases ("Yes" to the last question, multiple "Yes" response, "No" to all of the questions), code "7-DK if M.D." and footnote the situation.

- g) After the specialty code has been determined once for a specific person, it is not necessary to call again to verify this information for other households reporting visits to the same individual.

E4

Interviewer Check Item E4

E4

E4	<input type="checkbox"/> Complete—Personal visit
	<input type="checkbox"/> Complete—telephone
	<input type="checkbox"/> Refused
	<input type="checkbox"/> Other - Specify _____

Complete this item for each sample person when you complete the page for that person or when you have determined that you cannot complete the page.

CHAPTER 10. RESIDENTIAL MOBILITY PAGE

The purpose of these questions is to obtain information concerning the relationship between residential mobility and health status, especially for persons aged 17+ who are dependent on others for help in the performance of basic daily functions. These persons will be identified by an "X" in the "H" box above their columns. This page will also be asked of sample persons 17+.

Interviewer Check Item RM1

RM1		1 <input type="checkbox"/> H box, 17+ (1) 2 <input type="checkbox"/> SP, 17+ (1) 3 <input type="checkbox"/> Other (NP)
-----	--	--

Mark the first applicable box in item RM1. Thus, if you have marked the "H" box for a person who is also a sample person 17+, mark box 1. Proxy respondents are acceptable.

Question 1, Household Composition

Complete 1a and b from household composition items, if not clear, ask: 1a. Is -- related to any persons now living in this household? ----- b. Is -- now living with --'s: (1) Brother or sister? (2) Father or mother? (5) (Husband/wife)? (7) Son or daughter?		1a. 1 Y 2 N (2) b. 1 <input type="checkbox"/> Sibling 2 <input type="checkbox"/> Parent 3 <input type="checkbox"/> Spouse 4 <input type="checkbox"/> Child 5 <input type="checkbox"/> None of the above
MARK ALL THAT APPLY		

"Household composition items" are questions 1 and 2 above item C, name and relationship. If, based on these entries, you cannot determine relationships for the person you are asking about, ask question 1a and/or 1b. Mark "None of the above" if boxes 1-4 are not applicable.

Question 2, How Long Lived Here

2

2

2. How long has -- lived at this address? Enter number, then mark box if "3" years, ask: Was it less than 3 years or more than 3 years?	2.	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="border-bottom: 1px solid black; width: 80%;">Number</td> <td style="width: 20%; text-align: center;"> <input type="checkbox"/> Days <input type="checkbox"/> Weeks <input type="checkbox"/> Months <input type="checkbox"/> Years </td> </tr> </table>	Number	<input type="checkbox"/> Days <input type="checkbox"/> Weeks <input type="checkbox"/> Months <input type="checkbox"/> Years
Number	<input type="checkbox"/> Days <input type="checkbox"/> Weeks <input type="checkbox"/> Months <input type="checkbox"/> Years			

1. Enter the number response to question 2 on the "Number" line, then mark the appropriate box. Do not round up or down. For example, a response of 2½ months would be recorded as "2½", with the "months" box marked.
2. If the response is "three years," ask the probe question. If this response is "more than three" or "less than three," enter "3" on the number line and enter "more" or "less" under "number" and mark the "Years" box. If "exactly 3", enter "exactly" below the line and mark the "Years" box.

Interviewer Check Item RM2 and Question 3, Times Moved

RM2

3

RM2

3

RM2	RM2	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><input type="checkbox"/> 3+ years in 2 (NP)</td> </tr> <tr> <td><input type="checkbox"/> Less than 3 years in 2</td> </tr> </table>	<input type="checkbox"/> 3+ years in 2 (NP)	<input type="checkbox"/> Less than 3 years in 2
<input type="checkbox"/> 3+ years in 2 (NP)				
<input type="checkbox"/> Less than 3 years in 2				
3. Including the time -- moved here, how many times has -- moved in the past 3 years, that is, since 12-month date, 1976?	3.	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="border-bottom: 1px solid black; width: 80%;">Number</td> </tr> </table>	Number	
Number				

Mark a box in item RM2 according to the response in question 2, then ask question 3 if appropriate using the 12 month bed days and doctor visit date in item C. If the response entered in question 2 is "3 years exactly," mark box 1 in Item RM2.

Question 4, Address 3 Years Ago

4

4

4a. What was --'s address, including county (12-month date), 1976? Enter only county and State	4a. County _____ State _____
b. About how many miles is that address from here? _____ Miles	b. <input type="checkbox"/> Initial DK - PROBE _____ Miles
c. How many people was -- living with at that time, not counting --? _____	c. <input type="checkbox"/> Lived alone (S) _____ Number
d. Were any of these people related to --? (1) Brother or sister? (3) Father or mother? (5) (Husband/wife)? (7) Son or daughter?	d. 1 Y 2 N (S) e. 1 <input type="checkbox"/> Sibling 2 <input type="checkbox"/> Parent 3 <input type="checkbox"/> Spouse 7 <input type="checkbox"/> Child 0 <input type="checkbox"/> None of the above
MARK ALL THAT APPLY	

1. Again, insert the date entered in the 12 month bed days and doctor visits probe when asking question 4a. You must obtain the address and city for reference when asking 4b, but because of confidentiality rules, enter only the county and State the person was living in as of that date, 3 years ago. Enter "DK" if the respondent does not know the name of the county. However, if you know the county, enter the name instead of "DK." If the person lived in a State that has parishes or townships instead of counties, substitute these for counties. If it was an independent city not within any county, enter the city name and footnote the situation.

④ Address 3 Years Age (Continued)

④

2. If you receive a response of "DK" when you ask 4b, mark the "Initial DK - PROBE" box and probe by asking, "Could you give me an estimate?" and enter the response on the "miles" line.
3. Exclude the person you are asking about when asking 4c. For example, "How many people were you living with at that time, not counting yourself?"

Include in the number of people the person was living with, all persons who were household members whether or not they were related to the person you are asking about. Mark the "lived alone" box if the person lived alone at the time you are asking about.

4. Complete 4d and 4e in the same manner as 1a and b, except that you must always ask these questions; you cannot rely on current household composition.

⑤

Question 5, Reason for Moving

⑤

<p>5a. What is the (other) reason -- moved HERE? Was it because -- changed jobs, because -- retired, because of --'s health, or was it for some other reason?</p> <p>-----</p> <p>b. Any other reason?</p> <p>Mark box or ask:</p> <p>c. What is the MAIN reason -- moved?</p>	<p>5a.</p> <p>1 <input type="checkbox"/> Job-self</p> <p>2 <input type="checkbox"/> Retired-self</p> <p>3 <input type="checkbox"/> Health-self</p> <p>4 <input type="checkbox"/> Job-other person</p> <p>5 <input type="checkbox"/> Retired-other person</p> <p>6 <input type="checkbox"/> Health-other person</p> <p>7 <input type="checkbox"/> Other - Specify _____</p> <hr/> <p>b. Y (Reason 5a and b) N</p> <p><input type="checkbox"/> Only one reason</p> <p>c.</p>
---	---

Ask question 5 to determine why the person moved to the present address from his/her last address and mark all applicable boxes. This does not necessarily have to be the address given in response to 4a. If it is a volunteered the move was made because of someone else's job, health, etc., mark the appropriate "other person" box. If more than one reason is given for the move, ask 5c to determine the MAIN reason the person moved. If only one reason was given, mark the "Only one reason" box in 5c.

RM3

Item RM3, Respondent

RM3

<p>RM3 Q's 1-5</p>	<p>For persons 17 years or over, show who responded for (or was present during the asking of) Questions 1-5. If persons responded for self, show whether entirely or partly.</p>	<p>RM3</p> <p>1 <input type="checkbox"/> Responded for self-entirely</p> <p>2 <input type="checkbox"/> Responded for self-partly</p> <p>Person _____ was respondent</p>
------------------------	--	---

Complete item RM3 in the same manner as item R in the Probe pages to show who responded for the Residential Mobility page.

Chapter 11. Person Pages

Person pages 48 and 49 obtain information on height and weight, education, veteran status, and racial and ethnic background. Pages 50 and 51 obtain information on work status. Pages 52 and 53 obtain information on Medicaid, income, and "AFDC" assistance. Pages 54 and 55 obtain information about other supplementary income.

①

Question 1, Height and Weight

①

Mark box or ask:		<input type="checkbox"/> Under 17 (NP)
1a. About how tall is -- without shoes?	1e.	____ Feet ____ Inches
1b. About how much does -- weigh without shoes?	1f.	____ Pounds

- 1 Obtain height in feet and inches, using a dash if appropriate. Fractions are acceptable in the inches category. For example, 5 feet, 4½ inches.
- 2 If a person's weight is currently more or less than usual because of a temporary condition, such as pregnancy, record the present weight and footnote the situation.

②

Question 2, Education

②

Mark box or ask:		<input type="checkbox"/> Under 17 (NP)
2a. What is the highest grade or year -- attended in school?	2a.	oo <input type="checkbox"/> None (0)
		Elem: 1 2 3 4 5 6 7 8
		High: 9 10 11 12
		College: 1 2 3 4 5 6+
2b. Did -- finish the -- grade (year)?	2b.	Y N

- 1 Circle only one number to indicate the highest grade or year attended regardless of "skipped" or "repeated" grades.
- 2 Regular School - Count only grades attended in regular school where persons are given formal education in graded public or private schools, whether day or night school, and whether attendance was full time or part time. A "regular" school is one which advances a person toward an elementary or high school diploma or a college, university or professional school degree.
 - a If the respondent tells you a person graduated from high school but "they only had 11 years of school back then," ask if a high school diploma was received. If "Yes," circle the "12" opposite "High" and circle "Y" in 2b. If "No," circle the "11" opposite "High" and circle "Y" in 2b.

Education (Continued)

- b If it is volunteered that a person completed college in less than four years and obtained a degree (graduated), circle "4" opposite "College" and circle "Y" in 2b. If the person did not graduate or receive a college degree, circle the actual number of college attended years in 2a, and complete 2b accordingly.
- c If it is volunteered that a person completed four years of college but did not get a degree because it was a five-year program, such as engineering, circle "4" opposite "College" in question 2a and "Y" in 2b. If a person completed the fifth year of a five-year degree program and received a bachelor's degree, then circle "5" opposite "College" in question 2a and "Y" in 2b.
- d Also, persons may attend professional schools (law, medicine, dentistry) after less than four years of college. When the respondent answers in terms of these schools, obtain the equivalent in college years. If a nurse received training in college, determine the exact grade attended in college. However, if training was received at a nurses school or hospital training school and did not advance the person towards a regular college degree, determine the highest grade attended at the last regular school.
- 3 Nonregular School - Do not count education or training received in nonregular schools, such as vocational, trade or business schools, outside the regular school system. For example, do not count barber colleges, beautician schools, citizenship schools, and dancing schools; likewise, do not count training received "on the job," or service sponsored or correspondence school training unless it is given by a regular school and is credited toward a school diploma or college degree.
- 4 Junior High School - If the highest grade a person has attended is in a junior high school, determine the number of years attended and record the grade as if it has been in a school system with eight years of elementary school and four years of high school.
- 5 Postgraduate Schooling - For persons who have attended postgraduate high school but have not attended a regular college, circle the "12" opposite "High."
- For those with postgraduate college training, circle the "5" or "6+," as appropriate, opposite "College."
- 6 Other School Systems - If the person attended school in a foreign country, in an ungraded school, under a tutor, or under other special circumstances, give the nearest equivalent of the highest grade attended or the number of years of attendance.
- 7 No Schooling - For persons who have not attended school at all, mark the "None" box.

2

2 Education (Continued)

8 Question 2b, Grade (Year) Finished

- a If a person completed only a half year or failed to "pass" the grade, circle "N." Also circle "N" for a person who is currently enrolled in the regular school system. For example, a 17-year-old boy enrolled in the fourth year of high school would have "12" circled opposite "High" in question 2a, but since he would not yet have completed this grade, circle "N" in question 2b.
- b For a person with "6+" circled opposite "College" in question 2a who has gone through two or more postgraduate academic college years, circle "Y" in question 2b without asking the question.

3

Question 3, Service in the Armed Forces

3

3a. Did -- ever serve in the Armed Forces of the United States?		3a.	1 Y	2 N (NP)
b. When did he serve?		b.	1 VN	5 PVN
Circle code in descending order of priority. Thus if person served in Vietnam and in Korea, circle VN.			2 KW	6 OS
Vietnam Era (Aug. '64 to April '75) VN			3 WWI	9 DK
Korean War (June '50-Jan. '55) KW			4 WWI	
World War II (Sept. '40-July '47) WWII				
World War I (April '17-Nov. '18) WWI				
Post Vietnam (May '75 to present) PVT				
Other Service (All other periods) OS				

- 1 a Armed Forces - U.S. Army, Navy, Air Force, Marine Corps or Coast Guard and any National Guard Unit which was activated as part of the regular Armed Forces.
- b Armed Forces Service - "Active Duty" - Include the reservists or National Guardsmen who have served the 4-6 month period in connection with the provisions of the Reserve Forces Act of 1955. Persons who were or are in the Reserves but have only attended weekly meetings, summer camp or the like and have not completed the 4-6 month program, have not been on "active duty."
- c Exclude as having served in Armed Forces persons working in civilian positions for the Armed Forces, serving in the Merchant Marines, or serving in a National Guard Unit or reserve unit not activated as part of the regular Armed Forces.
- 2 Circle one of the codes listed in 3b based on the following rules:
 - a If the person served in one or more of the four major conflicts of this century, that is, the Vietnam Era, the Korean War, World War II, or World War I, circle the code for the most recent wartime service, regardless of any peacetime service or when the service was terminated.
 - b For persons who served in a time period other than those noted above, circled "OS" for "Other Service (all other periods)," unless the person served after the Vietnam Era (May 1975 to present). In these cases, circle "PVN." The "OS" code also covers service prior to World War I.

4

Question 4, Racial Background

4

<p>Hand CARD R - Mark box or ask.</p> <p>4a. Please give me the number of the group or groups which describes --'s racial background.</p> <p>Circle all that apply.</p> <p>1 - Aleut, Eskimo or American Indian 2 - Asian or Pacific Islander 3 - Black 4 - White 5 - Another group not listed - Please specify</p>	<p>4a. <input type="checkbox"/> Under 17 (NP)</p> <p>1 2 3 4 5 - Specify <u>7</u></p> <hr/> <hr/>
<p>If multiple entries ask.</p> <p>b. Which of these groups, that is, (entries in 4a) would you say BEST describes --'s racial background?</p>	<p>b. 1 2 3 4 5 - Specify <u>7</u></p> <hr/>

Statistics on racial background will be used in relating volume of doctor visits, dental visits, hospitalizations, and other health variables to the various racial and cultural groups of this country.

Hand the respondent Flashcard R and ask question 4a. Do not suggest a precode or category to the respondent and do not try to explain or define any of the groups.

- 1 Enter all response given in answer to 4a. If the respondent does not give a number but gives an answer that is exactly the same as one listed, circle the appropriate code. If the answer is not exactly the same as one on the card, circle "5" and write the verbatim response on the "specify" line.
- 2 If you get a response that appears to contradict your original observed race classification of the household, do not change your original entry. Question 4 is designed for respondent identification of the person's racial background.
- 3 If multiple responses are given in 4a, ask 4b to determine the person's MAIN racial background. If the respondent cannot answer the first time you ask the question, do NOT reask and do not pursue the matter any further. Enter "DK" in the answer space in that person's column. If the respondent gives more than one category in 4b, enter all responses.

5

Question 5, National Origin or Ancestry

5

Hand Card O - Mark box or ask.		<input type="checkbox"/> Under 17 (N/P)	
5a. Are any of these groups --'s national origin or ancestry? (Where did --'s ancestors come from?)	Se.	1 Y	2 N
-----		-----	
b. Please give me the number of the group. Circle all that apply.		b.	
1 - Puerto Rican	5 - Mexican-American	1 2 3 4 5 6 7 8	
2 - Cuban	6 - Chicano		
3 - Mexican	7 - Other Latin American		
4 - Mexicano	8 - Other Spanish		

Ask question 5 to obtain more detailed information about persons of Spanish background. The term "national origin or ancestry" refers to the national or cultural group from which the person is descended. Persons may report their origin based on the origin of a parent, a grandparent, or some far-removed ancestor.

If you are questioned as to why we are asking only about Spanish ancestry, say that we collect information on different cultural groups at different times.

- 1 Hand the respondent Card O and ask question 5a. If the respondent does not understand the question, read the probe on the questionnaire.

Circle "N" if the respondent says "no" with or without any explanations or qualifiers and go to the next person.

If the respondent does not say "No," but gives a group not specifically listed on the card, enter the response in the answer space, do not circle "Y" or "N," and go to the next person. If you are given a name or code that is on the card and one that is not listed, circle "Y" in 5a and the number from the card in 5b. For example, if the response is "No, I'm German," circle "N." If however, the person says "I am German," do not circle anything, enter "German" in 5a and go the next person. Do not record the other response.

- 2 If "Y" is circled in 5a, ask 5b and circle the code(s) of the category(ies) selected by the respondent. If the respondent gives you a name which is exactly the same as on the card, such as "Mexican," circle the appropriate code.
- 3 Do not change any previous answers based on information reported in question 5. This question is designed for respondent identification of the person's national origin or ancestry.

6

Question 6, Work Status in Past Two Weeks

6

Mark box or ask:	<input type="checkbox"/> Under 17 (NP)	
6a. Did -- work at any time last week or the week before -- not counting work around the house?	6a. 1 Y (?)	2 N
b. Even though -- did not work during these 2 weeks, does -- have a job or business?	b. 1 Y	2 N
c. Was -- looking for work or on layoff from a job?	c. 1 Y	2 N (?)
d. Which -- looking for work or on layoff from a job?	4. 1 <input type="checkbox"/> Looking	3 <input type="checkbox"/> Both
	2 <input type="checkbox"/> Layoff	

- 1 Question 6a, Worked Last Week or Week Before - Ask question 6a for each person 17 years old or over. Circle "Y" in 6a for a person who worked at any time last week or the week before, even for an hour.
- a Work - Paid work as an employee for someone else for wages, salary, commission or pay "in kind" (meals, living quarters, or supplies provided in place of cash wages). Also, include work in the person's own business, professional practice or farm and work without pay in a business or farm run by a related household member.
- b Exclude work around the house and volunteer or unpaid work, such as for church, Red Cross, or charity, and service in the Armed Forces.
- 2 Question 6b, With a Job or Business - A person who was temporarily absent from a job or business all of last week and the week before because of vacation, bad weather, labor dispute, or personal reasons, such as illness or maternity leave, but who expects to return when these events are ended, are considered as having a job or business. Circle "Y" for persons who say that they have a new job which they have not yet started, and enter a footnote, "New job - not yet started."
- a Job - A definite arrangement with one or more employers to work for pay, full time or part time.
- b On Call - Do not consider persons "on call" to work only when their services are needed as having a job during weeks when they do not work; for example a substitute teacher who did not work last week or the week before.
- c Seasonal - Consider seasonal employment as a job only during the season and not during the off-season.
- d Business - Persons have their own business (including a farm operation or professional practice) if they do one of the following:
- 1) Maintain an office, store, or other place of business.
 - 2) Use machinery or equipment in which they have invested money for profit.

⑥ Work Status in Past Two Weeks (Continued)

⑥

- 3) Advertise their business or profession by a listing in the classified section of the phone book, a display sign or distributes cards or leaflets publicizing the place.

3 Questions 6c and d, Looking for Work or on Layoff - Persons who are not working but consider themselves as having a job may actually be on temporary or indefinite layoff or looking for a job, and we want to identify such persons:

- a Looking for Work - Any effort to get a job or to establish a business or profession. A person was looking for work if he/she actually tried to find work during the past two weeks and also, if such efforts were made within the past 60 days, and the person was waiting during the past two weeks to hear the results of these earlier efforts. Some examples of looking for work are: Registering at an employment office; visiting, telephoning, or writing applications to prospective employers; placing or answering advertisements for a job; and being "on call" at a personnel office or at a union hiring hall, etc.
- b Layoff - Waiting to be called back to a job from which a person has been temporarily laid off or furloughed. Layoffs can be due to slack work, plant retooling or remodeling, seasonal factors, and the like. Persons who are not working because of a labor dispute at their own place of employment are not considered "on layoff" but with a job from which they are absent (that is, "Y" in 6c).

7

Question 7, Industry, Occupation, and Class of Worker

7

Ask for all persons with a "Yes" in 6a, b, or c. If "Yes" in only one of 6a, b, or c, apply to this person's LAST full-time civilian job.	7a. For whom did -- work? Name of company, business, organization, or other employer	7a. Employer
	b. What kind of business or industry is this? For example, TV and radio manufacturing, retail shoe store, State Labor Dept., farm	b. Industry
	c. What kind of work was -- doing? For example, electrical engineer, stock clerk, typist, farmer	c. Occupation
	d. What were --'s most important activities or duties? For example, types, keeps account books, files, sells cars, operates printing press, finishes concrete	d. Duties
	Complete from entries in 7a-d; if not clear, ask: e. Was -- an employee of PRIVATE company, business, or individual for wages, salary, or commission? P -- a FEDERAL government employee? F -- a STATE government employee? S -- a LOCAL government employee? L -- self-employed in OWN business, professional practice, or farm? If not a farm, ask: Is the business incorporated? Yes I No (or farm) SE -- working WITHOUT PAY in family business or farm? WP -- NEVER WORKED NEV	Class of worker 1 <input type="checkbox"/> P 3 <input type="checkbox"/> I 2 <input type="checkbox"/> F 4 <input type="checkbox"/> SE 3 <input type="checkbox"/> S 7 <input type="checkbox"/> WP 4 <input type="checkbox"/> L 8 <input type="checkbox"/> NEV(B);
	f. How many hours a week (does/did) -- usually work at that job?	f. _____ Hours
	If "N" in 6b, go to 8; otherwise ask: g. During the past 2 weeks, did -- have any other job or business?	g. 1 Y 2 N(B)
	h. How many hours a week does -- usually work for pay at ALL jobs?	h. _____ Hours

1 Ask questions 7a through 7e for all persons with "Y" circled in any one of questions 6a, b, or c. Also, 7f and 7g are asked if "N" was not circled in 6b.

2 For persons who worked during the past two weeks ("Yes" to question 6a) or are with a job but not at work ("Yes" to question 6b), these questions are about the present job. If a person worked at or has more than one job, these questions refer to the job at which the most time is spent. If equal time is spent at each job, it refers to the one the respondent considers most important or has had the longest period of time.

3 If a person is looking for work, on layoff from a job, or has a new job to begin in the near future, question 7 refers to the last "full-time" job or business lasting two consecutive weeks or longer. If the person has never had a full-time civilian job or business lasting two consecutive weeks or longer, enter "Never worked" in question 7a, skip to 7e and mark the "NEV" box. A "full-time" job is one at which the person worked 35 or more hours per week.

7a

4 Question 7a, Name of Employer - Enter the name of the company, business, government agency, or other employer. Do not use abbreviations in question 7a unless that is all the respondent can give you for the name of the employer. For persons who work for employers without company names, such as a farm, a dentist or lawyer's office, etc., write the name of the owner. Persons working for various private employers, such as baby sitters, domestics, etc., should be reported as "private families."

7a

7a

Industry, Occupation, and Class of Worker (Continued)

7a

- a Government - For government employees, record the specific organization and state whether the organization is Federal (U.S.), State, county, etc. For example, U.S. Treasury Department, State Highway Police, City Tax Office, etc. It is not sufficient to report merely U.S. Government for Police Dept., etc.
- b Self-employed - If the person is self-employed, ask if the place of business or establishment has a name (such as Twin City Barber Shop, Capitol Construction, etc.), and write it in 7a. If there is no business name, write "self-employed," "own business," etc.

7b

- 5 Question 7 b, Kind of Business of Industry - Do not repeat the name of the employer in this entry. Question 7 b should tell clearly and specifically what the company or business does at the location where the person works.

7b

- a Give a clear and exact description of the industry, indicating both a general and specific function for the employer; for example, copper mine, fountain pen manufacturer, wholesale grocery, retail bookstore, road construction, shoe repair service. The words mine, manufacturer, wholesale, retail, construction, and repair service show the general function. The words fountain pen, grocery, bookstore, road, and shoe indicate the specific function.
- b Avoid Use of the Word "Company" - Do not use the word "company" in this entry. It does not give useful information. If the person works for a metal furniture company, ask "Do they manufacture or do they just sell it?" If they just sell it, ask "Do they sell to other stores (which would be wholesale) or to individuals (which would be retail)?" Accordingly, the possible replies would be "furniture manufacturer," "furniture wholesaler," or "furniture retailer." Note that where possible, you should specify for furniture manufacturers the major material used--wood, metal, plastic, etc., but for the selling operation, it is not necessary, since furniture wholesalers and retailers very often sell various types.
- c Multiple Activity Business - Some firms carry on more than one kind of business or industrial activity. If the activities are carried on at the same location, describe only the major activity of the establishment. For example, employees in a retail salesroom, located at the factory of a company primarily engaged in the manufacturing of men's clothing, should be reported as working in "Men's clothing manufacturing."

7b

Industry, Occupation, Class of Worker (Continued)

7b

- 1) If the different activities are carried on at separate locations, describe the activity where the person works. For example, report a coal mine owned by a large steel manufacturer as "coal mine;" report the separate paint factory of a large chemical manufacturer as "paint manufacturing."
 - 2) A few specified activities, when carried on at separate locations, are exceptions to the above. Record the activity of the parent organization for research laboratories, warehouses, repair shops, and storage garages, when these kinds of establishments exist primarily to serve their own parent organizations rather than the public or other organizations. For example, if a retail department store has a separate warehouse for its own use, the entry for the warehouse employees should be "retail department store" rather than "warehouse."
- d Distinguish Among Manufacturing, Wholesale, Retail and Service - It is essential to distinguish among manufacturing, wholesale, retail, and service companies. Even though a manufacturing plant sells its products in large lots to other manufacturers, wholesalers, or retailers, it should be reported as a manufacturing company. Use the following as a guide:
- 1) A wholesale establishment buys, rather than makes, products in large quantities for resale to retailers, industrial users, or to other wholesalers.
 - 2) A retailer sells primarily to individual consumers or users but seldom makes products.
 - 3) Establishments which render services to individuals and to organizations such as, hotels, laundries, cleaning and dyeing shops, advertising agencies, and automobile repair shops are engaged in providing services. Report these as retailers but show the type of services provided, for example, TV and radio repair.
- e Manufacturers' Sales Offices - Record a separate sales office set up by a manufacturing firm to sell to other business organizations and located away from the factory or headquarters of the firm as "(product) manufacturers' sales office." For example, a St. Louis shoe factory has a sales office in Chicago; "shoe manufacturer's sales office" is the correct entry for workers in the Chicago office.
- f Government Organization - Usually the name of the government agency is adequate, for example, U.S. Census Bureau, City Fire Department.

7b

Industry, Occupation, Class of Worker (Continued)

7b

- 1) If the activity of the government agency is absolutely clear, the name of the agency is sufficient. In such cases, enter "Same as above" in 7b. However, sometimes the names of government agencies are not fully descriptive of their business or activity. A correct entry in 7b for a County Highway Commission might be one or any combination of the following: "County road building," "county road repair," "county contracting for road building (or repair)." For State Liquor Control Board, the correct entry might be "State licensing of liquor sales" or "State liquor retailer."
 - 2) If the business or main activity of a government employer is not clear, you should ask in what part of the organization the person works and then report that activity. For example, for a City Department of Public Works, a correct entry might be one of the following: "City street repair," "city garbage collection," "city sewage disposal" or "city water supply."
- g Persons Who Do Not Work at One Specific Location - Some people's work is done "on the spot" rather than in a specific store, factory, or office. In these cases, report the employer for whom they work in item 7a and the employer's business or industry in 7b. Among those who normally work at different locations at different times are Census interviewers, building painters, and refrigeration mechanics. Their industry entries might be U.S. Census Bureau, building contractor, or refrigeration repair service. For example, a local retail chain is doing remodeling of several stores, one at a time. They have a contract with a building contractor to furnish a small crew each day for the several months needed to do the work. Even though these people report to a retail store each day, they work for the building contractor.
- h Business in Own Homes - Some people carry on businesses in their own homes. Report these businesses as if they were carried on in regular stores or shops. For example, dressmaking shop, lending library, retail antique furniture store, insurance agency, piano teaching, boarding house, rest home, boarding children (for a foster home), etc.
- i Domestic and Other Private Household Workers - When the name of a single individual is given as the employer, find out whether the person works at a place of business or in a private home. The proper industry entry for a domestic worker employed in the home of another person is "private home." For a person cleaning a doctor's office which is in the doctor's own home, the proper entry is "doctor's office." This also applies to others, such as dentists or lawyers.

7b

Industry, Occupation, Class of Worker (Continued)

7b

- j Examples of Adequate Entries for Question 7b - The following are examples of inadequate and adequate entries for kind of business and industry (question 7b). Study them carefully and refer to them periodically to familiarize yourself with the types of entries that are proper and adequate.

Inadequate

Adequate

Agency	Collection agency, advertising agency, real estate agency, employment agency, travel agency, insurance agency.
Aircraft components Aircraft parts	Airplane engine parts factory, propeller manufacturing, electronic instruments factory, wholesale aircraft parts, etc.
Auto or automobile components Auto or automobile parts	Auto clutch manufacturing, wholesale auto accessories, automobile tire manufacturing, retail sales and installation of mufflers, battery factory, etc.
Bakery	Bakery plant (makes and sells to wholesalers, retail stores, restaurants, or home delivery), wholesale bakery (buys from manufacturer and sells to grocers, restaurants, hotels, etc.), retail bakery (sells only on premises to private individuals but may bake its own goods on premises).
Box factory	Paper box factory, wooden box factory, metal box factory.
City or city government	City Street Repair Department, City Board of Health, City Board of Education.
Private club	Golf club, fraternal club, night club, residence club.
Coal company	Coal mine, retail coal yard, wholesale coal yard.
Credit company	Credit rating service, loan service, retail clothing store (sometimes called a credit company).

7b

Industry, Occupation, Class of Worker (Continued)

7b

Inadequate

Adequate

Dairy	Dairy farm, dairy depot, dairy bar, <u>wholesale</u> dairy products, <u>retail</u> dairy products, dairy products <u>manufacturing</u> .
Discount house Discount store	Retail drug store, retail electrical appliances, retail general merchandise, retail clothing store, etc.
Electrical components manufacturer Electrical parts manufacturer Electronic components manufacturer Electronic parts manufacturer	Electronic tube factory, memory core manufacturing, transistor factory, manufacturer tape readers, etc.
Engineering company	Engineering consulting firm, general contracting, wholesale heating equipment, construction machinery factory.
Express company	Motor freight, railway express agency, railroad car rental (for Union Tank Car Company, etc.), armored car service.
Factory, mill or plant	Steel rolling mill, hardware factory, aircraft factory, flour mill, hosiery mill, commercial printing plant.
Foundry	Iron foundry, brass foundry, aluminum foundry.
Freight company	Motor freight, air freight, railway, water transportation, etc.
Fur company	Fur dressing plant, fur garment factory, retail fur store, wholesale fur, fur repair shop.
Laundry	a. Own home laundry (for a person doing laundry for pay in her own home). b. Laundering for private family (for a person working in the home of a private family). c. Commercial laundry (for a person working in a steam laundry, hand laundry, Chinese laundry, French laundry, or similar establishment).

7b

Industry, Occupation, Class of Worker (Continued)

7b

Inadequate

Adequate

c. Self-service laundry (for a person working in an establishment where the customer brings her own laundry and pays a fee to use the washing machine or other equipment).

Lumber company Sawmill, retail lumber yard, planing mill, logging camp, wholesale lumber, lumber manufacturer.

Manufacturer's agent
Manufacturer's representative Specify product being sold, such as jewelry manufacturer's representative, lumber manufacturer's agent, electric appliance manufacturer's representative, chemical manufacturer's agent, etc.

Mine Coal mine, gold mine, bauxite mine, iron mine, copper mine, lead mine, marble quarry, sand and gravel pit.

Nylon or rayon factory Nylon or rayon chemical factory (where chemicals are made into fibers); nylon or rayon textile mill (where fibers are made into yarn or woven into cloth); women's nylon hosiery factory (where yarn is made into hosiery); rayon dress manufacturing (where cloth is made into garments).

Office Dentist's office, physician's office, public stenographer's office.

Oil company
Oil industry
Oil plant Oil drilling, petroleum refinery, retail gasoline station, petroleum pipeline, wholesale oil distributor, retail fuel oil.

Packing house Meat packing plant, fruit cannery, fruit packing shed (wholesale packers and shippers).

Pipeline Natural gas pipeline, gasoline pipeline, petroleum pipeline, pipeline construction.

Plastic factory Plastic materials factory (where plastic materials are made), plastic products plant (where articles are actually manufactured from plastic materials).

7b

Industry, Occupation, Class of Worker (Continued)

7b

Inadequate

Adequate

Public utility

Electric light and power utility, gas utility, telephone company, water supply utility. If the company provides more than one service, specify the services; such as gas and electric utility, electric and water utility.

Railroad car shop

Railroad car factory, and diesel railroad repair shop, locomotive manufacturing plant.

Repair shop

Shoe repair shop, radio repair shop, blacksmith shop, welding shop, auto repair shop, machine repair shop, television repair shop.

Research

- a. Permanent-press dresses (product of the company for which research is done, when the company or organization does research for its own use), Brandeis University (name of university at which research is done for its own use), St. Elizabeth's Hospital (name of hospital at which medical research is done for its own use).
- b. Commercial research (if research is the main service which the company sells, and the research is done under contract to another company).
- c. National Geographic, Cancer Association, Brookings Institution (name of the nonprofit organization).

School

City elementary school, private kindergarten, private college, State university. Distinguish between public and private, including parochial, and identify the highest level of instruction provided, such as junior college, senior high school.

Tailor shop

Dry cleaning shop (provides valet service), custom tailor shop (makes clothes to customer's order), men's retail clothing store.

Terminal

Bus terminal, railroad terminal, boat terminal, airport.

Textile mill

Cotton cloth mill, woolen cloth mill, cotton yarn mill, nylon thread mill.

7b

Industry, Occupation, Class of Worker (Continued)

7b

Inadequate

Adequate

Transportation company

Motor trucking, moving and storage, water transportation, air transportation, airline, taxicab service, subway, elevated railway, railroad, petroleum pipeline, car loading service.

Water company

Water supply irrigation system, water filtration plant.

Well

Oil drilling, oil well, salt well, water well.

7c

6 Questions 7c and 7d, Kind of Work - The answer in question 7c should describe clearly and specifically the kind of work or nature of duties performed by the person. The answer in question 7d should tell you the person's most important activities or duties. Often, the response to question 7d together with the response to question 7c, will give you the information needed to make the person's occupation description complete, and thus, adequate.

7c

a How to Ask - Ask question 7c as worded, record the respondent's answer, and then ask question 7d. When the combination of entries in both questions 7c and 7d does not give you an adequate description of the person's occupation, ask additional probing questions for question 7c until the total combined information adequately describes the person's job. If you cannot confine your entry to the space provided, continue in the notes section.

b Examples of Combined Entries - The following example is provided to help clarify the use of the combined information in 7c and 7d.

<u>Inadequate</u>	<u>Adequate</u>		<u>Adequate</u>
7c - Mechanic	7c - Mechanic	OR	7c - Mechanic, auto body repairman
7d - Repairs cars	7d - Fixes dents, replaces fenders and other repairs to auto bodies		7d - Repairs cars

In this case it is important to distinguish between the person who works on auto bodies from the person who does automobile engine repair work. Either of the above adequate combined responses does that.

7c

Industry, Occupation, Class of Worker (Continued)

7c

- c Examples of Adequate Entries for Question 7c - The following are examples of inadequate and adequate job entries. If the combined entries for questions 7c and 7d provide the kind of information shown in the listing of adequate examples, accept them as being adequate.

Inadequate

Adequate

Accounting
Accounting work

Certified public accountant, accountant, accounting machine operator, tax auditor, accounts-payable clerk, etc.

Adjuster

Brake aduster, machine adjuster, merchandise complaint adjuster, insurance adjuster.

Agent

Freight agent, insurance agent, sales agent, advertising agent, purchasing agent.

Analyst
Analyzer

Cement analyst, food analyst, budget analyst, computer-systems analyst, etc.

Caretaker or
custodian

Servant, janitor, guard, building superintendent, gardener, groundskeeper, sexton, property clerk, locker attendant, vault attendant.

Claim examiner
Claim investigator
Claims adjuster
Claims analyst
Claims authorizer

Unemployment benefits claims taker, insurance adjuster, right-of-way claims agent, merchandise complaint adjuster, etc.

Clerical
Clerical work
Clerk

Stock clerk, shipping clerk, sales clerk. A person who sells goods in a store is a salesman or sales clerk--do not report them merely as a clerk.

Data processing

Computer programmer, data typist, key punch operator, computer operator, coding clerk, card tape converter operator.

Doctor

Physician, dentist, veterinerian, osteopath, chiropractor.

Engineer

Civil engineer, locomotive engineer, mechanical engineer, stationary engineer, aeronautical engineer.

Entertainer

Singer, dancer, acrobat, musician.

7c

Industry, Occupation, Class of Worker (Continued)

7c

Inadequate

Adequate

Equipment operator

Road grader operator, bulldozer operator, trencher operator.

Factory worker

Electric motor assembler, forge heater, turret lathe operator, weaver, loom fixer, knitter, stitcher, punch-press operator, spray painter, riveter.

Farmworker

Farmer - for the owner, operator, tenant or share cropper who is self-employed. Farm manager - for the person hired to manage a farm for someone else.

Farm foreman - for the person who supervises a group of farm hands or helpers.

Farmhand or farm helper - for those who do general farmwork.

Fruit picker or cotton chopper are examples of persons who do a particular kind of farmwork.

When the place of work is a ranch, indicate specifically rancher, ranch manager, ranch foreman, and ranch hand or helper, as shown above in the case for similar types of farmworkers.

Fireman

Locomotive fireman, city fireman (city fire department), fire fighter, stationary fireman, fire boss.

Foreman

Specify the craft or activity involved, as foreman carpenter, foreman truck driver.

Graphic arts

Illustrator, commercial artist, poster artist, art layout man, etc.

Group leader

Group leader on assembly line, harvest crew boss, clerical group leader, labor gang leader, recreation group leader, etc.

7c

Industry, Occupation, Class of Worker (Continued)

7c

Inadequate

Adequate

Heavy equipment
operator

Specify the type of equipment, such as:
Clam-shovel operator, derrick operator,
monorail crane operator, dragline operator,
Euclid operator, etc.

Helper

Baker's helper, carpenter's helper, janitor's
helper, etc.

IBM clerk
IBM machine operator
IBM operator

IBM card puncher, IBM tabulator, sorting
machine operator, proof machine operator, etc.

Interior decorator

Be sure that entries in question 7c differentiate
between the interior decorator who plans and
designs interiors for homes, hotels, etc., and
those who paint, paperhang, etc.

Investigator

Insurance claim investigator, income tax
investigator, financial examiner, detective,
social welfare investigator, etc.

Laborer

Sweeper, charwoman, baggage porter, janitor,
stevedore, window washer, car cleaner, section
hand, hand trucker.

Layout man

Pattern-maker, sheet-metal worker, compositor,
commercial artist, structural steel worker,
boilermaker, draftsman, coppersmith.

Maintenance man

Groundskeeper, janitor, carpenter, electrician.

Mechanic

Auto mechanic, dental mechanic, radio mechanic,
airplane mechanic, office machine mechanic.

Nun

Specify the type of work done, if possible, as
housekeeper, art teacher, organist, cook,
laundress, registered nurse.

Nurse
Nursing

Registered nurse, nursemaid, practical nurse,
nurse's aide, student, professional nurse.

Office clerk
Office work
Office worker

Typist, secretary, receptionist, comptometer
operator, file clerk, bookkeeper, physician's
attendant.

7c

Industry, Occupation, Class of Worker (Continued)

7c

InadequateAdequate

Program analyst	Computing-systems analyst, procedure analyst, vocational director, manufacturing liaison planner, etc.
Program specialist	Program scheduler, data-processing-systems supervisor, metal-flow coordinator, etc.
Programmer	Computer programmer, electronics data programmer, radio or TV program director, senior computer programmer, production planner, etc.
Research Research and development Research and testing Research assistant Research associate Research specialist Research work	Specify field of research, as research physicist, research chemist, research mathematician, research biologist, etc. Also, if associate or assistant, research associate chemist, assistant research physicist, research associate geologist, etc.
Salesman	Advertising salesman, insurance salesman, bond salesman, canvasser, driver-salesman (routeman), fruit peddler, newsboy.
Scientist	Specify field, for example, political scientist, physicist, sociologist, home economist, oceanographer, soil scientist, etc.
Specialist	If the word specialist is reported as part of a job title, be sure to include a brief description of the actual duties in question 7d. For example, for a "transportation specialist" the actual duties might be any one of the following: "Gives cost estimates of trips," "plans trips or tours," "conducts tours," "schedules trains," or "does economic analysis of transportation industry."
Shipping department	What does the <u>worker</u> do? Shipping and receiving clerk, crater, order picker, typist, wraps parcels, etc.

Industry, Occupation, Class of Worker (Continued)

Inadequate

Adequate

Supervisor

Typing supervisor, chief bookkeeper, steward, kitchen supervisor, buyer, cutting and sewing forelady, sales instructor, route foreman.

Systems analyst
Systems specialist

Computing-systems analyst, contract coordinator-manufacturer, production planner, etc.

Teacher

Teachers should report the level of school they teach and the subject. Those below high school who teach many subjects may just report level. College teachers should report title. Following are some illustrations:

<u>Level</u>	<u>Subject</u>
Preschool	-
Kindergarten	-
Elementary	-
Elementary	Music
Junior High	English
High School	Physical Ed.
College	Mathematics (Professor)

Technician

Medical laboratory technician, dental laboratory technician, X-ray technician.

Tester

Cement tester, instrument tester, engine tester, battery tester.

Trucker

Truck driver, trucking contractor, electric trucker, hand trucker.

Works in stock room,
bakery, office, etc.

Names of departments or places of work are unsatisfactory. The entry must specify what the worker does; for example, "shipping clerk" or "truck loader," not "works in shipping department;" "cost accountant" or "filing clerk," not "works in cost control."

- d Occupation of the Self-employed - Even when a person is self-employed, ask the occupation question: "What kind of work was -- doing?" Do not enter "proprietor" as the occupation unless the person actually spends most of the time in the management of the business. If the person spends most of the time in a trade or craft, record that as the occupation, that is, shoe repairman, beautician, or carpenter, as the case may be.

7c

Industry, Occupation, Class of Worker (Continued)

7c

- e Caution on Occupations of Young Persons - Professional, technical, and skilled occupations usually require lengthy periods of training or education which a young person normally cannot have. Upon further inquiry, you may find that the young person is really only a trainee, apprentice, or helper (for example, accountant trainee, electrician trainee, apprentice electrician, electrician's helper).
- f Unusual Occupations - You may encounter occupations which sound strange to you. Accept such entries if the respondent is sure the title is correct. For example, "sand hog" is the title for a certain worker engaged in the construction of underwater tunnels, and "printer's devil" is sometimes used for an apprentice printer. Where these or any other unusual occupation titles are entered, add a few words of description if the combined entries do not clarify the response.
- 1) Apprentice Versus Trainee - An "apprentice" is under contract during a training period but a "trainee" is not. Include both the occupation and the word "apprentice" or "trainee," as the case may be, in the description, for example, apprentice plumber, buyer trainee.
 - 2) Baby Sitter Versus Boarding Children - A "baby sitter" usually cares for children in the employer's home. Where the children are cared for in the worker's home, the occupation is "boarding children."
 - 3) Contractor Versus Skilled Worker - A "contractor" is engaged principally in obtaining building or other contracts and supervising the work. Classify skilled workers who work with their own tools as carpenters, plasterers, plumbers, electricians, and the like, even though they hire others to work for them.
 - 4) Housekeeper (Paid) Versus Housemaid - A "paid housekeeper" employed in a private home for wages has the full responsibility for the management of the household. A housemaid (general housework), hired girl, or kitchen maid does not.
 - 5) Interior Decorator Versus Painter or Paperhanger - An "interior decorator" designs the decoration plans for the interiors of homes, hotels, offices, etc., and supervises the placement of the furniture and other decorations. A house painter or paperhanger only does painting or hangs paper.

7c

Industry, Occupation, Class of Worker (Continued)

7c

- 6) Machinist Versus Mechanic or Machine Operator - A "machinist" is a skilled craftsman who constructs metal parts, tools, and machines through the use of blue prints, machine and hand tools, and precise measuring instruments. A "mechanic" inspects, services, repairs, or overhauls machinery. A "machine operator" operates a factory machine (drill press operator, winder, etc.).
- 7) Secretary Versus Official Secretary - Use the title "secretary" for secretarial work in an office; report a secretary who is an elected or appointed officer of a business, lodge, or other organization as an "official" secretary.
- 8) Names of Departments or Places of Work - Occupation entries which give only the name of the department or a place of work are unsatisfactory. Examples of such unsatisfactory entries are "works in warehouse," "works in shipping department," "works in cost control." The occupation entry must tell what the worker himself does, not what his department does.

7d

g Importance of Question 7d - The responses to the activity question, question 7d, are very important for coding purposes. Although the question may seem redundant in some cases, the responses often permit more accurate coding of the occupation. We cannot provide you with a complete list showing when an activity response together with the job title is adequate or when additional probing is necessary. However, we would like to stress the importance of the activity question in providing more detail even though it may not appear to. Here are some examples showing the value of question 7d:

7d

7c - Telephone Co. serviceman	7c - Telephone Co. serviceman
7d - Installs phones in homes	7d - Repairs telephone transmission lines

Both of these examples are an adequate combination of responses. However, with the additional information obtained from item 7d, the two responses identify different occupations even though the responses to question 4c are the same. These two telephone company servicemen will be assigned different occupation codes.

7c - Bookkeeping	7c - Bookkeeper
7d - Keeping and balancing ledgers	7d - Operates a bookkeeping machine

Again, adequate responses are obtained in both, but on the basis of the detail provided by question 7d, these occupations will be coded in different categories.

7d

Industry, Occupation, Class of Worker (Continued)

7d

These two examples illustrate the importance of the activity question, question 7d, in obtaining adequate responses even though the question may seem repetitive.

7e

7 Question 7e. Class of Worker - For each person with entries in questions 7a-d, record the class of worker by marking one of the boxes in question 7e. The information given in answer to questions 7a-d will usually be sufficient for identifying "class of worker." If that information is not adequate for this purpose, ask additional questions as necessary, for example, "Are you a local government employee?"

7e

- a Private-Paid - Mark "P" for work for a private employer for wages, salary or commissions. This includes also, compensation by tips, piece rates, or pay in kind, if received from a nongovernmental source, regardless of whether the source is a large corporation or a single individual. Include work for wages or salary for settlement houses, churches, unions, and other nonprofit organizations, such as Red Cross and U.S. Chamber of Commerce. Also, include work for private organizations doing contract work for State or local governments.
- b Government, Federal - Mark "F" for any branch of the Federal Government, including government-owned bus lines, government-owned electric power utilities, etc. Includes civilian employees of the Armed Forces and persons elected to paid federal offices. Mark "F" also for employees of international organizations, (for example, United Nations) and for employees of foreign governments, such as persons employed by the French Embassy or by the British Joint Services Mission. This rule applies only to those persons already listed in accordance with the instructions on whom to interview.
- c Government, State - Mark "S" for employees of State governments. This would include paid State officials, State police, and employees of State universities and colleges.
- d Government, Local - Mark "L" for employees of cities, towns, counties, and other local areas. Included here would be city owned bus lines, electric power companies, water and sewer services, etc. Employees of public elementary and secondary schools work for local governments. Since State Boards of Education often control subject content of schools and may also contribute money to the local areas for schools, some school employees think that they are State employees. But unless they work for a special school, such as for handicapped or experimental elementary school of the State University, they are in almost all cases local employees.

7e

Industry, Occupation, Class of Worker (Continued)

7e

- e Self-employed - Mark "SE" for persons working for profit or fees in OWN business, farm, shop, office, etc.
- 1) Include persons who have their own tools or equipment and provide services on a contract, subcontract, or job basis, such as carpenters, plumbers, taxicab operators, or truck operators.
 - 2) Exclude handymen, off job workers, superintendents, foremen, managers, or other executives hired to manage a business or farm, salesmen working for commission, and officers or corporations mark such persons "P."
 - a) If, in reply to your question, the respondent indicates that the business or profession is incorporated, mark "I."
 - b) If, in reply to your question, the respondent indicates that the business or profession is not incorporated, mark "SE." Also mark the "SE" box if the business is a farm.

NOTE: However, if the operator of the family enterprise has a wage or salary job in addition to the family farm or business, mark "P" and not "I" or "SE" in question 7e.

- f Nonpaid - Mark "WP" for work WITHOUT PAY on a farm or business operated by a related member of the household. Do not count room and board and a cash allowance as pay for these family workers; however, if the worker receives money which is definitely considered to be wages for work performed, mark "P."
- g Never Worked - Mark "NEV" for a person looking for work who never before held a full-time civilian job lasting two consecutive weeks or more.
- h Cautions Regarding Class-of-Worker Entries
- 1) Corporation Employees - Report employees of a corporation as employees of a private employer (except for a few cases of employees of government corporations, such as the Commodity Credit Corporation, who must be properly reported as Federal government employees). Do not report corporation employees as owning their business even though they may own part or all of the stock of the incorporated business. If a respondent says that a person is self-employed, and you find that the business is incorporated, mark the "I" box.

7e

Industry, Occupation, Class of Worker (Continued)

7e

- 2) Domestic Work in Other Persons' Homes - Report maid, laundress, cook, or cleaning woman working in another person's home as working for a private employer.
- 3) Partnerships - Report two or more persons who operate a business in partnership as self-employed in own business. The word "own" is not limited to one person.
- 4) Public Utility Employees - Although public utilities (such as transportation, communication, electric light and power, gas, water, garbage collection, and sewage disposal facilities) are subject to government regulations, they are owned by either government or private organizations. Distinguish between government-operated and privately-owned organizations in recording class of worker for public utility employees.
- 5) Work for Pay "In Kind" - Pay "in kind" includes room, board, supplies, and food, such as eggs or poultry on a farm. This is considered pay except for a member of the family. Report persons who work for pay "in kind" as employees of a private company or individual.
- 6) Work on an Odd-job or Casual Basis - Report work on an odd-job or casual basis as work of an employee for a private company, business, or individual. For example, do not report the baby sitter employed in other peoples' households as self-employed.
- 7) Clergymen and Nuns - Mark "P" for preachers, ministers, priests, rabbis, and other clergymen except in the following two cases:
 - a) Record a clergyman, such as a prison chaplain working in a civilian government job as a government employee—"F," "S," or "L" in question 7e.
 - b) Record a clergyman not attached to a particular congregation or church organization, who conducts religious services in various places on a fee basis, as self-employed in own professional practice—"SE" in question 7e.
 - c) Mark "P" for nuns who receive pay in kind.
- 8) Registered and Practical Nurses—Private Duty - Report registered nurses and practical nurses who report "private duty" for kind of business as "SE."

7e

Industry, Occupation, Class of Worker (Continued)

7e

- 9) PX (Post Exchange) Employees Versus Officer's Club, N.C.O. Club Employees, Etc. - Report persons working at a post exchange as "F." This nonprofit organization is controlled by government officials acting in their official capacity.
- 10) Foster Mothers and Child Care--Own Home - Report foster mothers and others who report their occupation as "child care" and industry as "own home" as "SE" class of worker. A foster mother and other persons who consider themselves as working for profit and who provide childcare facilities in their own homes are furnishing the shelter and meals for certain time periods and are to be considered as operating their own business.
- 11) Boarding House Keepers - Report boarding house keepers who consider themselves as working and who perform this work in their own homes as "Own home" for industry with "SE" class of worker. Report those who do this work for someone else for wages or salary or pay in kind as "boarding house" for industry with "P" class of worker.
- 12) Sales or Merchandise Employees - Report persons who own a sales franchise and are responsible for their own merchandise and personnel as "Retail or Wholesale Sales" for industry with "SE" class of worker. Report persons who do sales work for someone else (such as an Avon or Tupperware representative) as a "P" for class of worker. Also for such people, indicate whether they sell door-to-door or use the party plan method.
- 13) Post Office and TVA Employees - Report persons who work for the Post Office Department and Tennessee Valley Authority as federal employees and mark them as "F."
- 14) Comsat and Amtrak - Comsat and Amtrak are private companies and you should report the employees of these companies as "P."

7f g

7f g

8 Questions 7f-g-Hours Worked Weekly - Include hours spent on duty on the job but do not include lunch periods or other time off. Use whole numbers, counting 30 minutes or more as a whole hour.

- a. Ask 7f about the job reported in 7a-e. Use "does" if the person is currently working; use "did" if you are referring to the person's LAST full-time civilian job, "Y" in 6c only. Do not include hours worked without compensation in connection with a person's job. For example, do not include the time a teacher spends at home preparing lessons for the next day.
- b. If "Y" or blank in 6b, ask 7g to find out about other full or part-time jobs the person may have even if the individual didn't work at the job(s) during the past 2 weeks.

8 9

Questions 8 and 9, When Last Worked

8 9

8. Since (12-month date) a year ago, how many weeks did -- work, either part-time or full-time, not counting work around the house? Include paid sick leave and paid vacation.	8. <input type="checkbox"/> None <input type="checkbox"/> All year - 52 weeks _____ Weeks
If "Y" in 6a, go to NP; otherwise ask: 9. How long has it been since -- last worked at a job or business for two or more weeks, either full-time or part-time?	9. <input type="checkbox"/> Never worked <input type="checkbox"/> Less than 1 year _____ Number of years

- 1 Ask question 8 using the date entered in the "12 month bed days and Doctor Visit probe" in Item C2 regardless of any previous answers. Count as a week those which the person worked at least one hour. For example, if a person worked 3 hours a week for the entire year, mark the "All year - 52 weeks" box. Be sure to read the statement "Include paid sick leave and paid vacation" so it will be clear to the respondent that this time should be included.
- 2 Ask question 9 for persons with "N" circled in 6a. If questions arise, include work performed in the Armed Forces.

10 11

10 11

Questions 10 and 11, Medicaid Coverage

<p>10a. There is a national program called Medicaid which pays for health care for persons in need. (In this State it is also called _____.) During the past 12 months, has anyone in this family received health care which has been or will be paid for by Medicaid (or _____)?</p>	<p>Y N (17)</p>	
<p>b. Who was this? Mark "Medicaid" box in person's column.</p>		<p>10b. 1 <input type="checkbox"/> Medicaid</p>
<p>c. Anyone else?</p>	<p>Y (Reask 10b and c) N</p>	
<p>11a. Does anyone in the family now have a Medicaid (or _____) card which looks like this? Show Medicaid card.</p>	<p>Y N (12)</p>	
<p>b. Who is this? Mark "Card" box in person's column.</p>		<p>11b. 1 <input type="checkbox"/> Card</p>
<p>c. Anyone else?</p>	<p>Y (Reask 11b and c) N</p>	
<p>If "Card," ask: d. May I please see --'s (and --) card(s)? Mark appropriate box(es) in person's column.</p>		<p>d. <input type="checkbox"/> Medicaid card seen 1 <input type="checkbox"/> Current 2 <input type="checkbox"/> Expired 3 <input type="checkbox"/> No card seen 4 <input type="checkbox"/> Other card seen</p>

Question 10 refers to the receipt of health care during the past 12 months which has been or will be paid for by a public medical assistance program for persons in need. In most States, this program is known as "Medicaid." However, in some States, the program is known by a name other than "Medicaid." If you are interviewing in one of these States, include the parenthetical phrase and insert that State's name for the program from your State Medicaid card list. For example, when asking 10a in California, you would say "In this state it is also called Medi-cal." Use "Medicaid" and the State's name for the program at the end of the question. For example, in Maryland you would say "During the past 12 months, ... paid for by Medicaid or Medical assistance?"

10 11

10 11

Medicaid Coverage (continued)

- 2 Ask question 11, regardless of the answers to question 10, using both "Medicaid" and the State name for the program (if applicable) in 11a. Show the respondent the sample Medicaid card for the State in which you are interviewing.

In some States persons participating in certain health care programs may have cards which identify them as being eligible for Medicaid but are different from the card you show them. If a person has such a card consider this a "Yes" response to 11a.

If "DK" to 11a, write in the verbatim response. Enter "DK" in 11b for those persons to whom the DK applies and go to 11d for those persons who are known to have a card. However, if the status of the entire family is unknown, enter "DK" in 11a and go directly to question 12.

Ask to see the Medicaid cards for all persons with the "Card" box marked in question 11b. Insert the names of all these persons so that the respondent need make only one trip to get the cards.

- a If you are shown a Medicaid card the same as your sample card, mark the "Medicaid Card Seen" box in 11d in that person's column. Refer to the expiration date on the Medicaid card and also mark "Current" or "Expired" based on the date of interview. A card is considered "current" until the end of the day listed, or through the last day of the month listed if no day is specified. Mark the "Expired" box if the date or month on the card has passed.
- b Mark the "No card seen" box if the respondent does not show you a card for a person with "Card" marked in 11b.
- c If the card you are shown is not a Medicaid card, or if the card shows eligibility for Medicaid but is different from your sample card, mark the "Other card seen" box. Footnote the type of card and the expiration date, if any. Do not ask again for a Medicaid card.
- d If you are shown a Medicaid card from a State other than the one in which this family now resides, do not mark a box but footnote this information and specify in the footnote whether the card is current or expired.

12

Question 12, Family Income

12

Hand Card I.		00 <input type="checkbox"/> A	06 <input type="checkbox"/> G
12. Which of these income groups represents your total combined family income for the past 12 months - that is, yours, your --'s, etc.? Include income from all sources such as wages, salaries, social security or retirement benefits, help from relatives, rent from property, and so forth.	12.	01 <input type="checkbox"/> B	07 <input type="checkbox"/> H
		02 <input type="checkbox"/> C	08 <input type="checkbox"/> I
		03 <input type="checkbox"/> D	09 <input type="checkbox"/> J
		04 <input type="checkbox"/> E	10 <input type="checkbox"/> K
		05 <input type="checkbox"/> F	

Income is important in statistics for separating families into groups that live differently. The way people in different income groups live often affects their health. For example, income indicates:

- a Differences in ability to obtain adequate health care.
- b Differences in ability to afford food for adequate diets to prevent diseases, such as malnutrition in children.

1 Ask question 12 once for a family to obtain the total combined income for all related household members during the past 12 months. Ask this question of each unrelated household member or group individually at the time he is interviewed. If the respondent does not or will not answer the question for some reason, enter the reason in a footnote.

- a Hand Card I to the respondent, and then ask question 12.
- b Read the income question just as it appears on the questionnaire. After you ask the income question, give the respondent enough time to prepare an answer and mark the appropriate box. Where necessary, help the respondent obtain the total by summing the income of several family members or the income from several sources.

2 Income of All Related Members - We want the money income of the household head plus that of all relatives who are currently household members. If the head of the household is living alone or with no other relatives, include this income only.

- a Include the income of a related Armed Forces member who is living at home with the family even though we do not record health information about this person.
- b If the Armed Forces member is not living at home, include allotments and other money received by the family from this person.

3 Income of Unrelated Persons - On the questionnaire prepared for each roomer, servant or other person not related to the household head, mark the box for his or her individual income. If two or more such persons are related to each other, for example, roomer and his wife, mark the box for their combined incomes.

- 4 Include as Income - Wages and salaries, (including tips and cash bonuses), net income from business or farm, pensions, dividends, interest, rents, welfare, unemployment or workmen's compensation, alimony, child support, and other periodic money income. Also, include money periodically received from friends or relatives not living in the household.

- 5 Do not Count as Income
 - a Income in kind, such as room and board, free meals in restaurants, value of crops produced by a farmer but consumed by his family, etc.
 - b Insurance payments or lump sum inheritances.
 - c Occasional gifts or money from persons not living in the household or any exchange of money between relatives living in the same household.
 - d Money received from selling one's own house, car, or other personal property.
 - e Withdrawals of savings from banks.
 - f Tax refunds.

- 6 Where "Zero" Income Reported - When no one in the family had income or when a "loss" or "broke even" was reported as the total income for the family, mark the Group "A" box. Before accepting an answer of "No income," be sure the respondent understands all of the things we count as income.

- 7 Get Best Estimate - In difficult cases, you may have to help the respondent. Find out who worked during the past 12 months, how much they made a week, etc.; find out who operated a business or farm; or who received any pension, dividends, etc.

13-14

Questions 13 and 14, Person Income

13 14

<p>13a. Which (other) family members received some income during the past 12 months? Mark "Income" box in person's column.</p>	<p>13a. <input type="checkbox"/> Income</p>
<p>b. Did any other family members receive any income during the past 12 months? Y (Reask 13a and b) N</p>	
<p>If only one person with "Income" box marked, go to 15. If 2 or more persons with "Income" box marked, ask 14 for each.</p>	<p>06 <input type="checkbox"/> A 06 <input type="checkbox"/> G 07 <input type="checkbox"/> B 07 <input type="checkbox"/> H 08 <input type="checkbox"/> C 08 <input type="checkbox"/> I 09 <input type="checkbox"/> D 09 <input type="checkbox"/> J 10 <input type="checkbox"/> E 10 <input type="checkbox"/> K 11 <input type="checkbox"/> F</p>
<p>14. Which of these income groups represents -- s income for the past 12 months?</p>	<p>14.</p>

- 1 Ask questions 13a-b to determine the amount of income received by the individual family members.
 - a Ask question 13a and mark the "Income" box for each person reported as receiving income during the past 12 months. Then ask question 13b to determine if any other family members received some income during the past 12 months. If the answer is "Yes," reask 13a using the parenthetical "other" and mark the "Income" box in that person's column.
 - b If only one person receives income or if it is a one-person household, mark the "Income" box in that person's column, circle "N" in 13b, and go to question 15.

- 2 If there are two or more persons for whom you have marked the "Income" box in question 13, ask question 14 for each one, including Armed Forces members living at home.

This question obtains the income group which corresponds to the income received by each person during the past 12 months.

Do not probe to correct any inconsistencies between the responses given to question 14 and the family income reported in question 12.

- 3 If a Social Security or Welfare check is received in the parent's name but is intended for a child's care, mark the income box and the income group in the child's column.

- 4 If more than one person is covered by a bulk check, probe to determine the individual income. If this is unknown, put the total amount in the column for the person to whom the check is made out and footnote the situation. Follow this same procedure when recording income or allotments received from Armed Forces members living away from home.

15

Question 15, AFDC Assistance

15

15a. Does anyone in this family receive assistance through the "Aid to Families with Dependent Children" Program, sometimes called "AFDC" or "ADC"?	Y N (16)		
15b. Which (other) family members are included in the AFDC assistance payment? Mark "AFDC" box in person's column.		15b.	<input type="checkbox"/> AFDC
15c. Are any other family members included in this program?	Y (Reask 15b and c) N		

The "Aid to Families with Dependent Children" program was set up many years ago as an amendment to the Social Security Act and is known as AFDC and as ADC. Payments are based upon family income and number of dependent children. We are interested in identifying the family unit, that is, the adult and children, for whom these payments are intended.

- 1 If, after asking 15c, the respondent has not identified the adult AND the child(ren), probe to determine the adult whose name the checks are in or the child(ren) the money is for and mark the "AFDC" box in any additional columns.
- 2 If you still do not have this "family unit," footnote the situation. For example, "children live with grandparents," or "mother not household member."

16

Question 16, Supplementary Income

16

16a. Does anyone in the family receive the "Supplemental Security Income" or "SSI" gold-colored check?	Y N (17)		
16b. Who receives this check? Mark "SSI" box in person's column.		16b.	<input type="checkbox"/> SSI
16c. Anyone else?	Y (Reask 16b and c) N		

The "Supplemental Security Income" program provides monthly checks to individuals in financial need who are 65 and over and to people in need at any age who are blind or disabled.

Questions 17 and 18, Social Security Income

17 18

17 18

17a. Does anyone in the family receive any (other) income from Social Security?	Y N (18)		
b. Who is this? Mark "Social Security" box in person's column.		17b.	<input type="checkbox"/> Social Security
c. Anyone else?	Y (Repeat 17b and c) N		
People may receive Social Security benefits because of their own work experience or because they are dependents or survivors of someone who qualified, based on work experience. If "Social Security" ask: 18. Does (person in 17b) receive Social Security payments because of --'s own work experience or because -- is a dependent or survivor of someone who worked?			1 <input type="checkbox"/> Work experience 2 <input type="checkbox"/> Dependent or survivor

- 1 Question 17 - When asking this question, include the parenthetical "Other" if you receive a "Yes" response to question 16a.
- 2 Question 18 - Read the introductory statement above question 18 once for a family and then ask the question for each person with the "Social Security" box marked in question 17b.
 - a For most Social Security programs, such as Retirement Insurance, Survivor's Insurance, Disability Insurance and Black Lung benefits, payments are made either because the person worked the required number of years under the program or because the person is a dependent or survivor of someone eligible because of work experience. Mark the appropriate box based on the respondent's answer.
 - b There may be cases, however, when neither box is applicable. Special benefits are available to all persons aged 72 and over, and there is no work requirement for persons who became 72 before 1968. Also, some persons are eligible because of their own work experience but elect to receive benefits as a dependent or survivor of someone else because that income is more. Do not mark a box but footnote these situations if this information is given to you.
- 3 If question arise, use the following guides:
 - a Dependent or survivor - Persons who receive payments as a result of their relationship to someone who is or was eligible for payments from the Social Security program.
 - b Own work experience - These persons receive payments because they themselves have worked a certain number of years under the Social Security program.

Questions 19 and 20, Retirement Income

<p>19a. Including retirement payments received because of disability, does anyone in the family, (that is you, your --, etc.) receive any income from -</p> <p>If "Yes," ask 19b and c</p> <table border="0"> <tr> <td></td> <td style="text-align: center;">Y</td> <td style="text-align: center;">N</td> </tr> <tr> <td>(1) Railroad retirement?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>(2) Pension as a military retiree?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>(3) Government employee pension? (Federal, State, or local government)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>(4) Private employer or union pension?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table> <p>b. Who is this? Mark box in person's column.</p> <p>c. Anyone else?</p>		Y	N	(1) Railroad retirement?	<input type="checkbox"/>	<input type="checkbox"/>	(2) Pension as a military retiree?	<input type="checkbox"/>	<input type="checkbox"/>	(3) Government employee pension? (Federal, State, or local government)	<input type="checkbox"/>	<input type="checkbox"/>	(4) Private employer or union pension?	<input type="checkbox"/>	<input type="checkbox"/>	<p>19b. 1 <input type="checkbox"/> Railroad 2 <input type="checkbox"/> Military 3 <input type="checkbox"/> Government employee 4 <input type="checkbox"/> Private or union</p>
	Y	N														
(1) Railroad retirement?	<input type="checkbox"/>	<input type="checkbox"/>														
(2) Pension as a military retiree?	<input type="checkbox"/>	<input type="checkbox"/>														
(3) Government employee pension? (Federal, State, or local government)	<input type="checkbox"/>	<input type="checkbox"/>														
(4) Private employer or union pension?	<input type="checkbox"/>	<input type="checkbox"/>														
<p>For each income reported in 19b, ask:</p> <p>20. Does -- receive the (entry in 19b) because of --'s own work experience or because -- is a dependent or survivor of someone who worked?</p>	<p>20.</p> <table border="1"> <thead> <tr> <th></th> <th>OWN</th> <th>SURV</th> </tr> </thead> <tbody> <tr> <td>RR</td> <td></td> <td></td> </tr> <tr> <td>Military</td> <td></td> <td></td> </tr> <tr> <td>Gov't.</td> <td></td> <td></td> </tr> <tr> <td>Private.</td> <td></td> <td></td> </tr> </tbody> </table>		OWN	SURV	RR			Military			Gov't.			Private.		
	OWN	SURV														
RR																
Military																
Gov't.																
Private.																

- 1 Question 19 - As you ask about each type of retirement, make a check mark (✓) in the appropriate column. When you receive a "Yes" response, ask 19b and c and mark the appropriate box in that person's column. Continue by reasking 19a without the parenthetical phrase, about the next type of retirement income until all categories have been asked.
 - a It is possible for a person to receive payments from more than one source. If it is volunteered that the person receives income other than the types listed, footnote this information.
 - b "Pension" refers to income paid following the termination of work to a person who was employed by the particular business, company or organization providing the benefits. Pensions may also be paid to the survivors of deceased employees.

- 2 Question 20 - Ask this question about each retirement income reported for each person in question 19. For example, if the respondent reports a private employer pension for both herself and her husband and also a military pension for herself, ask question 20 separately about each of the three incomes reported.

Mark the "Own" or "Survivor" box(es) as appropriate. It is possible that the person may receive a particular type of payment both from his/her own work experience as well as from the work experience of someone else who had worked.

CHAPTER 12. TABLE X AND ITEM E



Table X



TABLE X - LIVING QUARTERS DETERMINATIONS AT LISTED ADDRESS			
Line No.	LOCATION OF UNIT		If outside Area Segment boundary, mark box below. STOP and - Go to next line of Table X, if additional quarters determined. OR Go to Household page, item 9, or Probe page, question 1 (as applicable).
	Where are these quarters located? Enter exact description or location, e.g., basement, 2 nd floor, rear After entering description or location: a in Area Segment, go to (3) b in other type of Segments. - If living quarters are not within the same specific sample address (and structure, if Permit Segment) - STOP TABLE X - Otherwise, go to (3)		
(1)	(2)	a If listed, enter sheet and line number. STOP Table X, and continue interview for original sample unit. b If unlisted, - And Area Segment, go to (4). - And another type of Segment, go to (5) (3)	(4)
1		S ___ L ___	<input type="checkbox"/> Outside segment boundary
2		S ___ L ___	<input type="checkbox"/> Outside segment boundary
3		S ___ L ___	<input type="checkbox"/> Outside segment boundary

NOTE Be sure to continue interview for original sample unit.

Are these "Specify location" quarters for more than one group of people? - "Yes," fill the line for each group.	USE OR CHARACTERISTICS			CLASSIFICATION		
	OCCUPIED Do the occupants of these "Specify location" quarters live and eat with any other group of people?	ALL QUARTERS Do these quarters in (Specify location) have		N - Not a separate unit - Add occupants to this questionnaire. (Complete a separate questionnaire for each - one and person or family group.) HU OT) Separate unit - interview on a separate questionnaire. (9)		
(5)	(6)	Direct access from the outside or through a common hall?	Complete kitchen facilities for this unit only?	(7)	(8)	(9)
Yes No	Yes - Go to (9) and circle N No	Yes No	Yes No	Yes No	N	HU OT
Yes No	Yes - Go to (9) and circle N No	Yes No	Yes No	Yes No	N	HU OT
Yes No	Yes - Go to (9) and circle N No	Yes No	Yes No	Yes No	N	HU OT

- Table X is designed to record the existence of additional living quarters at the sample address and to help determine whether the living quarters are a part of the unit being interviewed or constitute an EXTRA unit, to be interviewed on a separate questionnaire.
- See Part C, Topic **43** for instructions for filling Table X.
- Be sure to continue the interview for the original sample unit after filling Table X.

Ⓔ

Item E

Ⓔ

E	If this questionnaire is for an EXTRA unit, enter Control Number of original sample unit _____	If in AREA SEGMENT, also enter for FIRST unit listed on property _____	AREA SEGMENT LISTING SHEET	
			Sheet number	Line number

Complete item E (above Table X) on each questionnaire prepared for an EXTRA unit. Item E requires the control number of the original sample unit; and if the EXTRA unit is in an area segment, the Area Segment Listing Sheet and line number of the first unit listed on the same property as the original sample unit.

CHAPTER 13. PROCEDURES FOR EXTRA UNITS AND MERGED UNITS

A EXTRA Units

- 1 An EXTRA unit is an unlisted unit, found at the sample address at time of interview. For a more complete discussion of EXTRA units, refer to Part C, Topic (13).
- 2 Prepare an HIS-1 for each EXTRA unit, whether occupied or vacant.
 - a Transcribe to this questionnaire, heading items 2, 3, and 4 from the questionnaire for the original unit.
 - b Transcribe PSU and segment number to item 5 but leave the space for serial number blank.
 - c Item 7, YEAR BUILT - Mark the Ask or Do NOT Ask box the same as for the original unit.
 - d Item 10, Land use - Mark the URBAN/RURAL boxes the same as for the original sample unit.
 - e Fill item E on the back of the questionnaire for the EXTRA unit.
 - f If the EXTRA unit is occupied, complete the questionnaire in the usual fashion. If the EXTRA unit is vacant, fill the questionnaire as you would for any vacant unit.

See page E1-10 for items which must be filled prior to transmittal.

- 3 Prepare an INTER-COMM; fill the heading items and explain how the EXTRA unit was discovered. Attach the INTER-COMM to the questionnaire for the EXTRA unit.

B Merged Units

- 1 A merger is a unit which is formed by the combination of two or more units. The resulting unit may or may not be in the current sample.
 - a To determine if the merged unit should be interviewed, see Part C, Topic (25) of the manual.
 - b For merged units discovered at time of updating, see Part C, Topic (25).

2 Questionnaires

- a First Unit Involved in Merger—A Current Sample Unit - If the first of the listed units which are involved in the merger is a unit for which you have a questionnaire, interview the merged unit on that questionnaire. If the merger involves any other units for which you have questionnaires, return these questionnaires as Type C—merged.
 - b First Unit Involved in Merger—Not a Current Sample Unit - If the first of the listed units involved in the merger is not a current sample unit but the merger involves one or more other units for which you do have questionnaires, return all the questionnaires as Type C—merged.
 - c On the Questionnaire Used for the Merger - Enter in item 6a the complete description or address of the units now merged. In the footnotes section, enter the date the merger was discovered.
- 3 In addition to the entries required on the questionnaires for merged units, certain notations must be made on the listing sheet. For these instructions, refer to Part C, Topic ②5.
- 4 Prepare an INTER-COMM; fill the heading items and specify sheet and line numbers of the merged units. Attach the INTER-COMM to the questionnaires for the merged units.

CHAPTER 14. NONINTERVIEW HOUSEHOLDS

A General

A noninterview household is one for which information is not obtained because:

The unit is occupied but an interview was not possible.

or

The unit is occupied by persons not eligible for interview.

or

The unit is not occupied.

- 1 Noninterviews are classified into three groups—Types A, B, and C. The Type A group consists of households occupied by persons eligible for interview and for whom you would have filled questionnaires if you had obtained an interview. Sample units which are not interviewed for other reasons are Type B and C noninterviews. They are covered in Part C of this manual.
- 2 Every Type A noninterview means we are losing valuable information and our sample returns may not be representative of the population. These noninterviews may arise under the following circumstances:
 - a No one is found at home in spite of repeated visits.
 - b The entire family is temporarily away during all of the interview period.
 - c The respondent refuses to give information.
 - d The unit, although occupied, cannot be reached because of impassable roads.
 - e An interview cannot be made because of serious illness or death in the family.
 - f You are unable to locate a sample unit. (Not applicable in area segments.)

Under some circumstances, Type A noninterviews are unavoidable. However, if you establish good relations with your respondents and make your visits when people are likely to be home, you can avoid many noninterviews.

B Questionnaires for Noninterviews

Return a questionnaire for each noninterview sample unit. Mark the noninterview reason in item 18 and fill other items as indicated on the questionnaire.

C How to Report Type A Noninterviews

Mark one of the four boxes in HIS-1, item 18: "Refusal," "No one at home," "Temporarily absent," or "Other" as defined below for units occupied by persons eligible for interview which were not interviewed.

- 1 Refusal - Occasionally, a household may refuse to give any information. For example, the manager of a hotel or other type of special place may refuse to allow you to interview persons in the special place. In a footnote, explain the pertinent details regarding the respondent's reason for refusing to grant the interview. Return the HIS-1 as a Type A noninterview with "Refusal" marked.

Explain the circumstances on an Inter-Comm for any refusal household, attach it to the HIS-1 involved and mail it to the Regional Office with your other completed work. Your office will send a letter to the respondent (carbon copy to you) requesting the household's cooperation and stating that you will call on them again. If your supervisor will be in the area on other business, he may also visit the refusal household to try to obtain their cooperation.

- 2 No One at Home - If no one is at home at your first call, proceed as follows:

Fill a Request for Appointment (Form 11-38 or 11-38a) indicating when you plan to call back. Enter your name and telephone number in the space provided.

Also enter the date and time you said you would call back in a footnote on the Household page.

In situations in which the use of appointment forms is impractical, call back in an effort to contact the household. Try to find out from neighbors, janitors, or other knowledgeable persons when the occupants will be home.

If you have made a number of callbacks at various times of the day and still have been unable to contact the respondent, return the HIS-1 as noninterview, marking the "No one at home" box in item 18. Do not confuse this reason with the noninterview reason "Temporarily absent."

- 3 Temporarily Absent - When no one is home at the first visit, find out from neighbors, janitors, etc., whether the occupants are temporarily absent. Report a household as "Temporarily absent" if all of the following conditions are met:

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All the occupants are away temporarily on a vacation, business trip, caring for sick relatives, or some other reason, and will not return before your close-out date for that week.

and

The personal effects of the occupants, such as furniture, are there. Even if the furniture is there, be sure it is the occupant's furniture because it could be a furnished unit for rent.

and

The unit is not for rent or for sale during the period of absence.

EXCEPTION: The unit is for rent or sale; however, it is not available until a specified time when the present occupants will leave the unit. For example, the present occupants are trying to sell their house with an agreement that they would not have to move until two weeks after the selling date. If, when you arrive to interview the unit, you discover that it has not been sold and that the occupants are away for the interview period, mark "Temporarily absent" as the noninterview reason.

and

The unit is not a summer cottage or other seasonal type unit.

If the occupants will return on a certain date, record this date in the notes space of the Household page and the source of the information, such as a neighbor. If the date of their expected return is before the end of the interview period, make a return visit, if feasible.

If the occupants are definitely not expected to return before the end of the interview period, enter where they are--address and telephone number, if possible--and call the information to your office immediately. Depending upon where the occupants are, your office may be able to arrange with another office for one of their interviewers to obtain the interview.

- 4 Other - Mark occupied units which are noninterview for reasons other than "Refusal," "No one at home," or "Temporarily absent," as "Other" in HIS-1, item 18, with the specific reason entered in the space provided.

Among others, these reasons could include the following:

"No eligible respondent"

"Death in family"

"Household quarantined"

"Roads impassable" - During the winter months or in case of floods or similar disaster, there may be households which cannot be reached because of impassable roads. In such cases, ascertain whether or not it is occupied from neighbors, local grocery stores, gasoline service stations, Post Office or rural mail carrier, the county recorder of deeds, the U.S. Forest Service (Department of Agriculture) or other local officials.

If you determine the unit is occupied, mark "Other" in item 18 and describe the circumstances in the space provided.

If you determine the unit is vacant, determine which box to mark in item 18, Type B, using the criteria given in Part C, Topic 28.

D Type B and C Noninterviews

Mark the category that indicates why a sample unit is a Type B or C noninterview. An explanation of Type B and C noninterview reasons is given in Part C, Topic 28. Use the Other—Specify categories to describe any Type B or Type C noninterview for which a reason has not been provided. An INTER-COMM must accompany all Type C noninterviews.

CHAPTER 15. SMOKING SUPPLEMENT, FORM HIS-1(S)

The Department of Health, Education, and Welfare has recently initiated a public education program to encourage people to give up smoking, to cut down on smoking, or to smoke cigarettes with lower tar and nicotine levels. The HIS will be collecting, over a period of time, information on the amount and kinds of cigarettes people smoke, and their attempts to quit. This information will be used to determine the effect of the smoking education program.

Administer the supplement after you have completed the HIS-1 Person pages but before question 10 on the Household page. A separate supplement must be completed for each household in which you have administered the HIS-1. You must also complete a separate supplement for each unrelated person or family group within a household if these persons have been selected as sample persons for that household. Ignore the numbers which appear in boxes throughout the supplement.

1

Item 1, Book of Books

1

1.
Book _____ of _____ Books

When completing this item, use the same procedure as for item 1 on the HIS-1 Household page.

2 6

Items 2-6, Identification

2 6

2. R.O. number	3, 4	3. Sample	5-7	4. Control number	PSU	8-10	Segment	11-14	Serial	15, 16
5. Interviewer's name				Code	17, 18	6. Telephone (Q 15)		19		
						1 Y		2 N		

On each supplement you use, transcribe items 2-4 from the Household page and enter your name and code in item 5. Complete item 6 after leaving the household. Items 1-6 must be filled for each household for which an HIS-1 is completed even though there may not be a sample person.

Ignore the "Coders Use" and "Code Blank" boxes.

Coders Use	20-22
<input type="text"/>	<input type="text"/>
Code Blank	23

S1

Item S1, Transcription Items

S1

S1. For each sample person enter name, person number, age, and sex from HIS-1.	First name	Person No.	
	Last name		
	Age	Sex	Coders use
	26,27	M F	1 2

Refer to the HIS-1 SP box above person columns to determine sample persons. Before asking the Smoking Supplement questions, transcribe the name, age, sex, and person number of each sample person regardless of age. Be sure that the person numbers have been transcribed correctly. Do not make any entries in the "Codiers Use" box.

If no sample persons were selected for the regular HIS interview, enter "no sample persons" on the cover page of form HIS-1(S).

S2

Interviewer Check Item S2

S2

S2	1 <input type="checkbox"/> 17 (NP)	10
	2 <input type="checkbox"/> 17, callback req. (NP)	
	3 <input type="checkbox"/> 17, available	

Mark a box in item S2 in each person's column. Ask questions 1-10 as a block for each sample person aged 17 and over. If the person is not at home or is unavailable, mark box 2. Then in item 20 on the HIS-1 Household page, enter the person number; circle "Y" in the "SS Req." column and arrange for a telephone callback. Do not accept a proxy respondent for a sample person 17+ unless that person is physically or mentally incapable of answering. If a proxy is accepted, this must be footnoted, e.g., "Person 3 mentally retarded, Person 1 respondent." In this case do not mark a box in S2 for this person.

①

Question 1; Cigarettes Smoked During Entire Life

①

1. Have you smoked at least 100 cigarettes in your entire life?	1 Y	2 N (NP)	31
---	-----	----------	----

This question is designed to classify persons who have smoked very little in their lives (less than 100 cigarettes) with those who have never smoked. For the purposes of this survey, these persons are considered to be nonsmokers whether or not they are currently smoking. Nonsmokers will not be asked the remainder of the smoking supplement questions.

Do not define "cigarettes" for the respondent. If respondents ask whether little cigars, for example are considered cigarettes, find out how they would classify them and accept that classification.

②

Question 2, Regular and Occasional Smokers

②

2a. About how old were you when you first started smoking cigarettes fairly regularly?	2a. _____ Years (3)	32, 33
	33 <input type="checkbox"/> Never smoked regularly	
b. Do you smoke cigarettes now?	b. 1 Y	2 N (NP) 34
c. On the average, about how many cigarettes a day do you smoke?	c. _____ Number (NP)	35, 36

Question 2a is designed to separate persons who have never smoked regularly (occasional smokers) from persons who have been or are now regular smokers. The current smoking levels of occasional smokers are determined in 2b and 2c. In question 2a, do not try to define "fairly regularly" for the respondent.

Ask question 2b for those persons who report that they have never smoked regularly. For persons who indicate they have stopped smoking temporarily, for example, due to illness, but expect to begin again, circle "Y." In other words, if the person has no intention of stopping entirely or has made no effort to stop, consider that person as smoking now.

2 Regular and Occasional Smokers (Continued) 2

In question 2c, enter the average number of cigarettes smoked per day, not the number of packs. There are 20 cigarettes to a pack. If the response is given in packs, multiply that number by 20. For example, a response of 1½ packs should be entered as "30" cigarettes.

3 Question 3, Most Cigarettes Smoked 3

3. During the period when you were smoking the most, about how many cigarettes a day did you usually smoke?	3.	_____ Number	17.1
---	----	--------------	------

Daily smoking levels during periods of peak cigarette smoking will be compared to current daily smoking levels in question 5. Enter the average number of cigarettes smoked per day during the peak smoking period in the same manner as for question 2c.

4 Question 4, Smoke Cigarettes Now 4

4a. Do you smoke cigarettes now?	4a.	1 Y (S) 2 N	32
b. About how long has it been since you last smoked cigarettes fairly regularly?	b.	2 <input type="checkbox"/> Days 3 <input type="checkbox"/> Weeks 4 <input type="checkbox"/> Months 5 <input type="checkbox"/> Years	40-4 53

Ask question 4a in the same manner as 2b. If respondents indicate that they have stopped smoking temporarily, consider that person as smoking now. In question 4b, accept the respondent's interpretation of "fairly regularly." Enter the answers in the same time units given by the respondent. Record the number of units verbatim, then mark the appropriate box. Do not convert the answer to any other units. For example, if the answer is "12½ months," enter "12½" on the number line and mark the "months" box.

5 Question 5, Cigarettes Smoked Per Day Now 5

5. On the average, about how many cigarettes a day do you now smoke?	5.	_____ Number	33.4
--	----	--------------	------

Question 5 determines current smoking levels for regular smokers. Enter the answer to this question in the same manner as for 2c.

The entry in question 5 cannot be more than the number of cigarettes smoked per day entered in question 3, since question 3 refers to daily smoking levels during the peak smoking period. Resolve any discrepancy with the respondent. Remember that both questions ask for number of cigarettes, not packs.

S3

Interviewer Check Item S3

S3

S3	S3
	<input type="checkbox"/> "Y" in 4a (6) <input type="checkbox"/> Less than 1 year in 4b (6) <input type="checkbox"/> 1+ years in 4b (NP)

Mark a box in item S3 based on the entry in question 4a and b and follow the appropriate skip instruction.

6

Question 6, Brand of Cigarette

6

6a. What brand of cigarettes do (did) you usually smoke? <hr/> If more than one brand ask: b. Which brand do (did) you smoke the most?	6a. Brand name(s) 45 <hr/> Brand name (4b, 45) b. 45
--	---

The tar, nicotine, and carbon monoxide levels of cigarettes will be determined from the brand and type. It is important to be able to distinguish between the various brands of cigarettes smoked to assign the correct tar and nicotine levels for each brand reported. Refer to the Smoking Supplement cigarette probe card which contains a list of cigarettes brands for which a probe is necessary if the EXACT brand name is not given in response to either question 6a or 6b. A typical probe for a response of Kents would be "Is this Kent Golden Lights, Kent Mictonite II, or is it just Kent?"

If the respondent is a current smoker (box 1 marked S3), ask questions 6a and 6b in the present tense. If you marked box 2 in S3, use the past tense when asking question 6.

Record 6a the brand name(s) verbatim. If more than two brands are mentioned, footnote the names of the others. If in response to 6b the respondent smoked several brands equally, record the brand mentioned first. If the respondent does not usually smoke any particular brand(s), footnote this information and skip to 8a.

7

Question 7, Type of Cigarette

7

7. What type of cigarettes are the (brand) that you smoke (smoked)? Are they: a. Filter tip OR Non-filter tip? b. Plain OR Menthol? c. Hardpack OR Softpack? d. Regular OR King size OR 100 Millimeter?	a. <input type="checkbox"/> FT <input type="checkbox"/> NFT b. <input type="checkbox"/> P <input type="checkbox"/> M 50 c. <input type="checkbox"/> HP <input type="checkbox"/> SP 51 d. <input type="checkbox"/> R <input type="checkbox"/> K <input type="checkbox"/> 100 52
---	--

When asking question 7, insert the brand name recorded in 6a, or if multiple brands, the one recorded in 6b. Use the past or present tense (smoked/smoke) depending on the box marked in S3.

⑦ Type of Cigarettes (Continued)

⑦

When asking each part of question 7 be sure to read each pair of statements together. For example, ask "What type of cigarettes are the Camels that you smoke? Are they filter tip or non-filter tip?"

Record that response and then ask "Plain or Menthol?" Continue in this manner until each part of question 7 is completed, marking only one box for each part. In 7d, if the response is "120 millimeter" cigarettes, mark the "100 millimeter" box.

Even though question 7 refers to a single brand, some respondents might report smoking more than one type of cigarette of the same brand (e.g., both plain "Carltons" and menthol "Carltons"). If this is the case, probe to determine which type the respondent smokes most. Then mark the appropriate box. If the respondent says he/she smokes more than one type of the same brand of cigarette equally, record this answer in a footnote. Be sure to indicate to which part of question 7 (a, b, c, or d) the footnote refers.

Interviewer Check Item S4

S4

S4

4a. Have you ever made a serious attempt to stop smoking cigarettes? 1. YES 2. NO (NP)	5
---	---

Mark one box in item S4 based on the entry in 4a and follow the appropriate skip instruction.

Question 8, Attempts to Stop Smoking

⑧

⑧

8a. Have you ever made a serious attempt to stop smoking cigarettes?	8a. 1. YES 2. NO (NP)	5
b. About how many times would you say you made a fairly serious attempt to stop smoking cigarettes entirely?	b. 0 1 Never (NP) 1 2 3 4 5+	5
c. During the past 12 months, that is since (date) a year ago, about how many times would you say you made a fairly serious attempt to stop smoking cigarettes entirely?	c. 0 1 2 3 4 5+	5

Current regular smokers may have made serious attempts to give up smoking in the past or they may be trying to quit at the time of the interview. Questions 8, 9, and 10 identify persons who have tried to quit and collect information on the patterns of their attempts to quit. This information will be used to measure the effect of the smoking education program.

Do not define "serious attempt" for the respondent. If it is indicated the respondent made a serious attempt to stop smoking, but did not succeed in stopping entirely, consider this a "Yes" response. Use the date in the "12 month bed days and doctor visit" probe when asking 8c.

9

Question 9. Last Tried to Stop Smoking

9

9. How long ago was the START of the LAST time you tried to stop entirely?	9.	2 <input type="checkbox"/> Days	57-59
		3 <input type="checkbox"/> Weeks	
	Number:	4 <input type="checkbox"/> Months	
		5 <input type="checkbox"/> Years	

Ask question 9 to determine the time elapsed since the start of the person's most recent attempt to stop smoking. Attempts to stop smoking usually span an interval of time. This question refers to the beginning of that interval. If the respondent is confused by this question, repeat it slowly. A respondent who is currently attempting to quit may think that the question refers to a previous attempt to quit. In this case, make sure that the respondent understands that you are referring to the most recent, that is current, attempt to stop smoking. Enter the response in the same manner as for question 4b.

10

Question 10. How Long Stopped

10

10. How long did you actually stay off cigarettes the last time?	10.	2 <input type="checkbox"/> Days	60-62
		3 <input type="checkbox"/> Weeks	
	Number:	4 <input type="checkbox"/> Months	
		5 <input type="checkbox"/> Years	
		ooo. Did not stay off	

Ask question 10 to determine how long the person stayed off cigarettes the last time he/she stopped smoking. If the response indicates the person did not go without smoking as much as a day, mark the "Did not stay off" box. If the respondent is currently attempting to stop but has not stayed off for at least one day, mark the "Did not stay off" box. If the respondent did stay off for at least one day, enter the response in the same manner as for question 4b.

S5

Item S5. Transcription Items

S5

S5. Transcribe for each sample person 17+ after leaving household.	S5	60 <input type="checkbox"/> None	63, 64
		1a. Elem: 1 2 3 4 5 6 7 8	
		High: 9 10 11 12	
		College: 1 2 3 4 5 6.	
b. Finished grade (Q 2a, p. 48)	b.	1 Y 2 N	65
2. Racial background (Q 4a, b, p. 48) (If single entry in 4a, transcribe that entry. If multiple entry in 4a, transcribe entry in 4b.)	2.	1 2 3 4 5 - Specify	66
3. Family income (Q 12, p. 52)	3.	00 <input type="checkbox"/> A 04 <input type="checkbox"/> E 08 <input type="checkbox"/> I 12 <input type="checkbox"/> J	67, 68
		01 <input type="checkbox"/> B 05 <input type="checkbox"/> F 09 <input type="checkbox"/> J	
		02 <input type="checkbox"/> C 06 <input type="checkbox"/> G 10 <input type="checkbox"/> K	
		03 <input type="checkbox"/> D 07 <input type="checkbox"/> H	

Complete these items after leaving the household. Transcribe items 1 and 2 from the HIS-1 for each sample person aged 17 and over. Transcribe item 3 from the family head's column in HIS-1.

S6

Interviewer Check Item S6

S6

S6. Final Status	S6 1 : Complete - Personal visit 2 : Complete - Telephone 3 Refused 4 : Not at home - Repeated calls 5 : Temporarily absent 6 : Other - Specify
------------------	---

Complete this item for each sample person aged 17 and over when you finish the supplement for that person or when you have determined that you cannot complete an interview for that person. Mark "refused" if the respondent refused to answer all of the questions on the supplement.

NOTE: The Smoking Supplement is a separate questionnaire, independent of the HIS-1. Do not under any circumstances make changes to the HIS-1 as a result of something you learned while asking these questions.

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PART E

INTERVIEWING TECHNIQUES AND ADMINISTRATIVE

CHAPTER 1. INTERVIEWING TECHNIQUES

A How to Begin the Interview

1 Introduce Yourself to the Respondent

a The first step in the interview is to introduce yourself, including these five points:

- 1) Your name.
- 2) The U.S. Bureau of the Census.
- 3) Your Identification Card.
- 4) The fact that it is a health survey.
- 5) U.S. Public Health Service.

b A suggested introduction is:

"I am _____ from the United States Bureau of the Census; here is my identification card. We are taking a health survey for the National Center for Health Statistics which is part of the United States Public Health Service."

c If you are not invited in immediately after you have introduced yourself, and you determine that the household is to be interviewed, you may add, "May I come in?"

2 Conforming to the Privacy Act of 1974

a An advance letter, sometimes called the "Dear Friend" letter, is sent out from the Regional Office on Monday preceding the week of interview. It is sent only to those households for which a specific street address or mailing address has been obtained. This letter tells the respondent that this household has been selected for inclusion in the sample and briefly explains the general purpose of the survey in addition to conforming to the Privacy Act of 1974.

- b It will be necessary for you to inquire if respondents received the "Dear Friend" letter. It is not necessary to ask if they have read it. If the "Dear Friend" letter was not received or if the respondent does not know if it was received, provide him/her with a copy. If the respondent wishes to read the letter prior to the interview, allow sufficient time for that purpose. If the respondent inquires about the purpose of the survey, even though a copy of the "Dear Friend" letter had been provided, you should offer an explanation such as:

"The Bureau of the Census is conducting the HIS Survey for the U.S. Public Health Service because of the urgent need for up-to-date statistics on the health of the people. The survey is authorized by Title 42, United States Code, Section 242k. The information collected is confidential and will be used only to prepare statistical summaries. Participation in this survey is voluntary and there are no penalties for refusing to answer any question. However, your cooperation is extremely important in obtaining much needed information to insure the completeness and accuracy of the data."

At households where two or more members are interviewed at different times, it is not necessary to give the second person a letter or to inquire if the original letter was seen.

- c After inquiring about the "Dear Friend" letter and seating yourself, begin immediately with the first question of the interview: "What is your exact address?" The sooner the respondent begins to participate in the interview, the better. To start off with the interview is much more desirable than to describe the types of questions you are planning to ask.
- d If persons who are not members of the immediate family are present, suggest to the respondent before continuing that it might be preferable to talk in a more private place. Even though a respondent might not refuse to be interviewed under these circumstances, the presence of outsiders might cause a reluctance to talk about certain types of illnesses which could result in a loss of information and cause a bias in the data.

3 Further Explanation of the Survey

a Background of the Health Interview Survey

- 1) The National Health Survey, of which the Health Interview Survey is a part, is authorized by Title 42, United States Code, Section 242k. The National Health Survey is supported by both major political parties, by the American Medical Association, and other organizations.
- 2) The National Health Survey is a fact-finding survey only. Everyone realizes the importance of information about people's health and medical care, and they trust the survey to be concerned only with gathering facts about these health problems--and not with how the problems should be solved. Actually, when there are controversies about how to solve some health problem both sides turn to the Health Interview Survey for the facts on the situation because they trust the survey to be unbiased.
- 3) If the respondent confuses this survey with other census work, or the 10-year Census, explain that this is one of the many special surveys that the Census Bureau is asked to carry out because of its function as an objective fact-finding agency and because of its broad experience in conducting surveys.

b Reluctant Respondents

- 1) You will find that most respondents will accept your introduction as the reason you are taking the survey. However, there will be a few who will want more information about the survey and you should be prepared to answer their questions. There may be a few others who are reluctant to give information, or who may actually refuse to be interviewed because they don't want to be bothered or because they don't believe the survey has any real value.

- 2) If you have difficulty in obtaining an interview, or if the respondent questions the purpose of the survey, use the information given in the letter, the explanation in the flashcard booklet and/or the material in Part A, Chapter 1 of this manual. Use your own words to suit the level of understanding of the respondent and stress the confidential treatment given to all information received. This should be done also at any point during the interview if the respondent should hesitate to answer certain questions.
- c Why This Household--Explain that it would be too costly and time-consuming to interview everyone in the United States and therefore a sample of addresses was selected. The respondent's happens to be one of the representative addresses picked. Say that the selection was not based on who lives at the address, and whether or not they have problems with their health. Each address represents approximately 1,800 households. Taken as a group, the people living at these sample addresses will represent the total population of the United States in the health statistics produced and published by the Public Health Service.
- d How Long Will It Take
- 1) Mention that the length of the interview depends on the number of people in the family and on their health conditions. Do not say that the interview will take only a few minutes.
 - 2) If the respondent states that he/she has no time right now for an interview, find out when you can come back. However, always assume (without asking) that the respondent has the time right now unless you are told otherwise.

B Your Own Manner

- 1 Your greatest asset in conducting an interview efficiently is to combine a friendly attitude with a business-like manner. If a respondent's conversation wanders away from the interview, try to cut it off tactfully, preferably by asking the next question on the questionnaire. Overfriendliness and concern on your part about the respondent's personal troubles may actually lead to your obtaining less information.

B2

- 2 It is especially important in this survey that you maintain an objective attitude. Do not indicate a personal opinion about replies you receive to questions, even by your facial expression or tone of voice. Since the illness discussed may be of a personal or serious nature, expressions of surprise, disapproval, or even sympathy on your part may cause respondents to give untrue answers or to withhold information. Your own objectivity about the questions will be the best method for putting the respondents at ease and making them feel free to tell you to the conditions and illnesses in the family.
- 3 Avoid "talking down" to respondents when explaining terms but give as direct and simple explanations as possible.

C How to Ask the Questions

- 1 Ask Each Question as Instructed--The uniformity and value of the final results depend on all interviewers asking the questions in the same order and with the same wording.
 - a If you change the order, it is likely that both you and the respondent will become confused. This is especially true of the health questions, which refer to different periods of time. Asking the questions out of order would force the respondent to keep jumping back and forth between time periods and would invite confusion.
 - b It is bad interviewing practice to ask a question when the respondent has already provided you with the specific answer. It may confuse the respondent, or even cause antagonism, and may result in loss of information for later questions in the interview.
 - c If you are sure of the specific answer, you may make the appropriate entry without asking the question. However, if you are not sure about the earlier answer, it is good interviewing practice to verify the answer by saying something like: "I believe you told me earlier that a motor vehicle was involved in the accident, is this correct?"

- 2 Listen to the respondent until the statement is finished. Failure to do so can result in your putting down incorrect or incomplete entries. The two most common types of errors made in this regard are:
 - a Failure to listen to the last half of the sentence because you are busy recording the first half.
 - b Interrupting before the respondent has finished, especially if the person hesitates. A respondent often hesitates when trying to recollect some fact, and you should allow sufficient time for this to be done. Also, people will sometimes answer "I don't know" at first, when actually they are merely considering a question. When you think that this may be the situation, wait for the respondent to finish the statement before repeating the question or asking an additional question.
- 3 Repeat the Question--The respondent may not always understand the question when it is first asked, and sometimes you can tell from the answer that the question has not been understood. In this case, repeat the question using the same phrasing as you used originally. This should not prove to be embarrassing since what you said the first time was not heard or understood. Frequently the respondent is capable of understanding the question but has missed a word or two. If you think it is helpful, you can preface the repetition of the question by a phrase, such as "I see," "Oh, yes," and the like, and then repeat the actual question.
- 4 Repeat the Answer--Sometimes it is helpful to repeat the respondent's answer and then pause expectantly. Often this will bring out additional information on the subject. It is also useful as a check on your understanding of what has been said, especially if the statements or comments given have not been entirely clear. For example, "Including your doctor visit last week, that makes three times during the past two weeks?"
- 5 Avoid Influencing the Respondent
 - a Experience in other studies has shown that respondents tend to agree with what they think you expect them to say, even though the facts in the case may be different. Therefore, you must avoid "leading" the respondent by adding words to the questions or making slight changes in them that might indicate an answer you expect to hear.

C5

- b Even slight changes which may seem to make no apparent difference can prove harmful and should be avoided. For example, the question, "During those two weeks did you stay in bed because of any illness or injury?" is greatly changed in meaning when changed to, "You didn't stay in bed during those two weeks because of any illness or injury, did you?" The question, "What did the doctor say it was? Did he give it a medical name?" would have a different meaning if changed to, "Did the doctor say you had glaucoma?"
- c Changes in question wording such as these suggest answers to the respondent and must be avoided. In an effort to be helpful the respondent may say, "Yes, that was it" or "That is true" or "That sounds about right;" whereas, the facts may have been quite different.
- d Sometimes the respondent may not know the answers to the questions, and if this is the case, record the fact that the information is not known.

- 6 Information Given Out of Turn or Volunteered--Sometimes respondents will start describing the health of the family in answer to the very first question and will cover their own illnesses and those of other family members in such a way that it is difficult to know which person has which condition. When this happens, you should explain that you cannot keep up in recording the information and ask them to permit you to ask the questions as they appear so that the information need not be given more than once.

If however, a single condition is volunteered (reported while asking questions not designed to pick up conditions), during the asking of the probe questions, refer to D3-18, paragraph 1a to determine whether or not it should be entered in item C2.

7 Do Not "Practice Medicine"

- a Do not try to decide yourself whether or not any member of the household is ill. If the respondent mentions some condition but makes light of it or expresses doubt that the person was "ill," enter the condition on the questionnaire anyway and ask the appropriate questions about it.

- b Do not attempt to diagnose an illness from the symptoms, or to substitute names of diseases for the respondent's own description of the trouble. If an answer to a question is not specific or detailed enough, ask additional questions in accordance with instructions in paragraph D below. However, the final entry must always represent what the respondent said, in his or her own words.
- c If respondents ask for any information regarding health, refer them to their physician or the local medical society.

8 Pacing the Interview

- a Try to avoid hurrying the interview even under trying circumstances. If respondents sense that you are in a rush to complete the questions and get out of the house, they will probably cooperate by omitting important health information which they might feel would take too much time to explain and record.
- b Maintaining a calm, unhurried manner and asking the questions in an objective and deliberate way will do much to promote an attitude of relaxed attention on the part of the respondent.

D Probing

1 When to Probe

- a Sometimes a person will give you an answer which does not furnish the kind of information you need or one which is not complete. It will be necessary to ask additional questions to obtain the required information, being careful to encourage the respondent to do the explaining without suggesting what the explanations might be. Ask as many questions as necessary to satisfy yourself that you have obtained complete and accurate information insofar as the respondent is able to give it to you.
- b Be sure to keep asking additional questions until you have a complete picture and all the pertinent details.
- c However, do not "over-probe." If the respondent does not know the answer to a question, do not try to insist that an answer be given. This might cause irritation and also cause concern about our interest in accurate responses.

2 How to Probe

- a Ask additional questions in such a way that you obtain the information required without suggesting specific answers. For example, "Please explain that a little more," "Please describe what you mean," or "What was the operation for?" Fit the questions to the information which has already been given.

D2

- b In some instances you may need to suggest specific alternatives when general phrases have not been successful in obtaining the information. This is also an acceptable method for asking additional questions, provided the respondent is never given a single choice. Any items specifically suggested must always consist of two or more choices. The examples below illustrate both acceptable and unacceptable methods for asking additional questions.

<u>Acceptable</u>	<u>Not acceptable</u>
1) Can you tell me the approximate number of days?	Would you say it was six days?
2) You said you first noticed the condition about a year ago. Was it more than 12 months ago or less than 12 months ago?	Was it more than a year ago?
3) Do you all live and eat together?	Are you all one household?
4) Does she live the greater part of the year here or at her sister's home?	Is she a member of this household?
5) What kind of asthma is it?	Is it bronchial asthma?

- c The "Not acceptable" questions in examples 3) and 4) show an interviewer who is unable to apply Census rules for determining the composition of a household, and expects the respondent (who doesn't know the Census rules) to make the decision.
- d The "Not acceptable" questions in examples 1) and 5) illustrate an invitation to the respondent to just say "Yes" without giving any thought to the question.
- e The "Acceptable" question in example 2) illustrates a proper way to give the respondent an opportunity to tie an event to a particular period of time. The "Not acceptable" question is again an invitation to the respondent to say "Yes."

E Recording Information Correctly

Recording information correctly is just as important a part of the interview as asking the questions correctly. This involves writing clearly and plainly in the space allotted for descriptive entries. If additional description is required, make free use of the footnote space. Be careful not to leave blank spaces where they should be filled in.

- 1 Use a black lead pencil or ball point pen.
- 2 Use "DK" for "don't know" only to indicate that the respondent does not know the answer to a particular question. Do not use it to fill answers for questions that you may have overlooked at the time of interview.
- 3 If, after an interview, you discover blanks in the questionnaire for questions which should have been asked, leave the items blank.

F Review of Work

- 1 At Close of Interview--Look over the questionnaire while you are in the house so that you can ask any missing items or clarify any questions you might have. Check to be sure:
 - a You have completed a Condition page for each condition listed in item C2.
 - b You have completed a two-week doctor visits column for each doctor visit or call recorded in item C1.
 - c You have completed a hospital column for each hospital/nursing home stay recorded in item C1.
 - d You have completed all "Home Care" information.
 - e You have completed the Individual Home Care page for each person with the "H" box marked.
 - f You have completed the Immunization Page for all persons under 17.
 - g You have completed the Eye Care Page for each sample person or made arrangements for a callback.
 - h You have completed the Residential mobility page for each person with the "H" box marked and for each sample person aged 17+.
 - i You have completed all "Person" information.
 - j You have completed the Smoking Supplement for each sample person aged 17+ or made arrangements for a callback.

F1

k You have entered dates and times for callbacks on the Household page.

2 Prior to Transmittal

a Review the Household pages for completeness. Verify that you have correctly filled the following items:

1) EXTRA Units

1 through 5 (Except serial number.)

6

7 (Ask or Do NOT Ask box must be marked same as for original unit. YEAR BUILT boxes marked, if required.)

8

10 (RURAL or URBAN box must be marked same as for original unit.)

11 through 12 (If required.)

13 through 21

Item E

2) Nonrelated Household Members

1 through 5

6b

15 through 21

3) More Than One Questionnaire for Related Household Members

1 through 5

17

4) Noninterviews

All items must be completed as specified in item 18.

b When you review your questionnaires, do not enter any information which should have been furnished by the respondent and recorded during the interview.

G "Thank You" Letters

The "Thank You" letters are signed by the Director of the National Center for Health Statistics. Leave one of these at each household after the interview has been completed. The letter thanks the respondent briefly for his cooperation and can be shown by the person interviewed to other members of the household who were not at home at the time of your call. In leaving the letter, say something such as: "Here is a letter of appreciation from the U.S. Public Health Service," or "Here is a letter from the Public Health Service thanking you for your cooperation in this survey."

H Use of Telephone

Use a local telephone wherever practicable. Telephone only:

1. To make appointments.
2. To obtain one or two items of information which you find are missing.
3. To complete the required Eye Care Page(s) and Smoking Supplement(s) for eligible sample persons.

Consult your Administrative Handbook on use of long distance calls.

CHAPTER 2. ADMINISTRATIVE

A Transmittal of Materials

- 1 Transmit all "materials" for a segment to the Regional Office together, in the same package. These include all questionnaires (completed interviews and final noninterviews), supplements, and the Segment Folder.
- 2 Mail the materials on the day you make your last call, that is, complete your last interview, in the (each) segment, but no later than Saturday of interview week.
- 3 If you feel you will not be able to complete your assignment by Saturday of interview week but can complete it by Monday or Tuesday of the following week, contact your office by Friday for instructions.
- 4 If you have picked up an EXTRA unit(s), enter "EXTRA" in the serial number column of the "Record of Transmittal" on the Segment Folder, following the serial numbers for questionnaires received from your office.
- 5 Enter the date you are mailing the "materials" for the segment in the Segment Folder in the "Date of Shipment" column opposite serial number "01."
- 6 If, in unusual circumstances, you are permitted to complete any questionnaires after interview week, enter the following notation in the lower left-hand corner of the mailing envelope: "Late transmittal for Week _____" (enter the appropriate interview week number, for example, 01, 02, etc.).

APPENDIX A TO PART E

CONFIDENTIAL NATURE OF INFORMATION COLLECTED
IN NATIONAL HEALTH SURVEYS

- 1 General - National Health Surveys are conducted for the U.S. Public Health Service by the Bureau of the Census.
- 2 Nondisclosure of Information - The Health Interview Survey involves obtaining on a continuing basis details of the personal health records of a large number of individuals throughout the Nation. The Public Health Service has given assurance to the public that information identifying the individual will be held strictly confidential, will be used solely by persons engaged in and only for, the purposes of the survey, and will not be disclosed or released to other persons or for any other purpose. Bureau of the Census employees will observe this assurance of confidentiality and are subject to the Public Health Service as well as Department of Commerce and Bureau of the Census laws against unauthorized disclosure.
- 3 Subpoena of Records - In the event of a record collected in the Health Interview Survey being subpoenaed, any Bureau employee upon whom such subpoena is served will communicate with the Director of the Census through your Regional Office. Action to satisfy such subpoena will be taken only as authorized by Public Health Service Regulations, Section 1.108 of Title 42, Code of Federal Regulations.
- 4 Penalties for Unauthorized Disclosure or Falsification - Unauthorized disclosure of individual information collected in the National Health Surveys is punishable by a fine of up to \$1,000, or imprisonment up to one year, or both (18 U.S.C. 1905). Deliberate falsification by an employee of any information in the survey is punishable by a fine up to \$10,000, or imprisonment up to five years, or both (18 U.S.C. 1001).
- 5 In keeping with the confidentiality rules, do not mention the Health Interview Survey by name when you are asking neighbors, agents, etc. to help you determine when members of sample households will be home. Instead, say "I am conducting a survey for the U.S. Public Health Service and I would like to know when someone at -- (address) will be at home," or something similar.

APPENDIX B TO PART E
DIAGNOSTIC ERROR CODES

<u>Error Code</u>	<u>Definition</u>
01	"Condition" which was reason for operation or surgery not given on same Condition page or in same hospital column. If code 01 is assigned, no other code is assigned.
02	"Condition" which was reason for laboratory tests, X-rays, observation, etc., not given in same hospital column. For example, "tests for ulcers" but the test results or final diagnosis is not given with no entry to indicate results or final diagnosis not known. If code 02 is assigned, no other code is assigned. An entry of checkup, routine checkup, or general checkup is acceptable.
03	Question 3a of Condition page or question 6 of Hospital page is "DK" or left blank; only "part of body" is entered; or "Part of body" entered with only very vague description of condition, for example, "bad back," "stomach bothers," "tubes in ear," "limps," "heart failure," etc. (with no indication as to what is wrong); or if the "Condition on Card C" box is marked in A1, Condition page or question 6, Hospital page, for a condition which is not on Card C. If code 03 is assigned, no other code is assigned.
04	"Cause" not given in question 3b, Condition page or question 6, Hospital page, for a condition other than cancer or those conditions on Card C. "On Card C" marked in 3b for a condition not on Card C.
05	"Kind" or "Manifestation" not given in question 3c, Condition page or question 6, Hospital page, for the conditions specified in question 3c.
06	"Effects" or "Manifestation" not given in question 3d, Condition page for allergy or stroke. "Effects" or "Manifestation" not given in question 6, Hospital page, for allergy. "Stroke" in 3b as the cause of a condition in 3a is acceptable.
07	"Part of body" is inadequate or not given in question 3e, Condition page or question 6, Hospital page, for the conditions, impairments or parts of body specified in 3e.

Error CodeDefintion

- 08 Accident questions (17-21, Condition page) not filled for an injury or for a condition due to an accident or injury. Footnote entry, "Same accident as condition _____," is acceptabte.
- 09 "Part of body" not given or inadequate in question 18, Condition page or question 6, Hospital page, for an accident or injury.
- 10 Inadequate description of "kind of injury" in 18a, Condition page or in question 6, Hospital page, for an accident or injury.
- 11 "Present effects" inadequate or not given in 18b, Condition page, for injury which happened before three months ago. For example, can't bend, no use of, etc.
- 12 Question 10 blank or incomplete for persons six years old or over for first condition reported on Condition page.
- 14 Impossible date or omission in question 2, Hospital page.
- 15 Omission or inconsistent entries in questions 4-5c of Hospital page.
- 16 Condition page not filled for condition reported on Hospital page only, with one or more nights in question 5b, Hospital page.
- 17 Condition page not filled for condition reported on two-week doctor visits page only.
- 18 Positive responses in probe questions 5-9, 11 and/or 14-17 and no entry in item C2 from these sources.
- 19 Limitation reported in probe questions 21-27 and no entry in item C2 from these sources.
- 20 Condition page not filled for a condition recorded in item C2.
- 21 No separate Condition page filled when more than one condition is on a single Condition page in question 3a.
- 22 Positive responses to probe questions 29-31 and no entry in item C1.
- 23 Hospital page not filled for Hospitalization reported in item C1.
- 24 Doctor visit column not filled for doctor visit reported in item C1.

PART F
GLOSSARY

PART F
GLOSSARY

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ACCIDENT--(D3-31) An unexpected event causing loss or injury resulting from carelessness or unavoidable causes. The terms "accident" and "injury" may be used interchangeably. There are cases, however, when an injury may not be accidental, for example, a war injury, a shooting, a stabbing, etc.

Also, accidents may occur without a resulting injury. For purposes of this survey, we are not interested in accidents in which there was no injury involved, unless there was restricted activity or medical attention in the past 2 weeks.

ADULT--Eligible respondent--(D3-1) 19 years old or older, or ever married.

ALL OR MOST OF THE DAY--(D3-24) More than half of the waking day.

ANNULLED MARRIAGE--(D3-21) Consider persons whose only marriage has been annulled as "never married."

ARMED FORCES--(D3-7) U.S. Army, Navy, Air Force, Marine Corps, or Coast Guard, and any National Guard Unit activated as part of the regular Armed Forces.

Include the six-month period served in connection with the provisions of the Reserve Forces Act of 1955.

Do not count as service in the Armed Forces, persons working in civilian positions for the Armed Forces, or serving in a National Guard Unit not activated as part of the regular Armed Forces.

BED--(D3-24) Anything used for sleeping including sofa, cot, or mattress.

BEING IN A HOSPITAL--(D3-51) Being admitted and staying overnight or longer in a hospital. Exclude visits to emergency room, or outpatient clinic.

BUSINESS, OWN--(See "Self-employed.")

CALENDAR CARD--(D1-4) A two-month calendar, interview month and preceding month.

COMMON LAW MARRIAGE--(D3-21) Consider persons with a common law marriage as married.

COMPANY OR INDUSTRY CLINIC--(D5-5) A company or plant doctors's office or clinic which is operated solely for the employees of that company or industry.

CONDITION--A state of health or physical fitness.

CONDITION TO BE ENTERED IN C2--(D3-18) A health problem or accident resulting in restricted activity, a doctor visit during the past 2 weeks; limitation of activity or conditions reported while asking the condition list, (question 32) if present during the specified time period.

CONVALESCENT HOME--(See "Nursing Home.")

CUT DOWN AS MUCH AS A DAY--(D3-27) A day when a person cuts down on his usual activities for the whole of that day because of illness or injury. Usual activities for any day means things that the person would usually do on that day.

Restricted activity does not imply complete inactivity, but all or most of a person's usual activities for

the day must be restricted for him to have a cut-down day.

DAY IN BED--(D3-24) Any day on which the person was kept in bed either all or most of the day because of illness or injury. Do not count taking a nap on "General principles" as a day in bed. Count the days as a patient in a hospital, sanitarium or nursing home as bed days whether or not the patient was actually lying in bed at the hospital, sanitarium or nursing home. Exclude hospital days for a normal newborn, unless the baby had some complication or illness.

DAYS LOST FROM WORK OR SCHOOL--(D3-24-25) A scheduled work or school day when more than 1/2 of the day was lost due to an illness or injury. Exclude Saturdays, Sundays, and holidays unless scheduled.

DENTIST--(D3-33) A person trained in the prevention, diagnosis, and treatment of diseases of the teeth and adjacent tissues. For example, oral surgeon, orthodontist, periodontist, dental hygienist.

DIAGNOSIS OR TREATMENT--(D5-8) (a) An examination or test to diagnose an illness, regardless of whether the examination or test resulted in a diagnosis, or, (b) treatment or advice given by the doctor or under the doctor's supervision.

Include X-rays either for diagnostic purposes or treatment in this class.

DOCTOR--(D3-35) A medical practitioner with an M.D. or D.O. (Doctor of Osteopathy) degree, including ophthalmologists (occulists). Exclude chiropractors, chiroprodists, podiatrists, optometrists.

GENERAL PRACTITIONER--(D5-6) A medical doctor who does not limit his practice to a specialty.

SPECIALIST--(D5-6) A medical doctor who limits his practice to certain groups of people (children, women, etc.), certain conditions (diabetes, arthritis, etc.), certain parts of the body (eyes, ears, nose, and throat, etc.) or special procedures (anesthesia, radiology, etc.).

DOCTOR VISIT (SEE OR TALKED TO)--(D3-35)

(1) A visit by the person to the doctor, visits to a doctor's office, a clinic, a medical center and the outpatient department of a hospital where a person goes for treatment or examination ordered by a doctor but where he may not actually see or talk to a doctor.

(2) A visit by the doctor to the person. If the doctor visits the household to see one patient and while there examines or visits professionally another member of the household, count this visit as "doctor seen" or each individual for each condition receiving the doctor's attention.

(3) Telephone calls to or from a doctor (except requests for appointments or inquiries about a bill), including calls concerning the obtaining or renewal of a prescription.

(4) The case in which the person is himself a doctor and he followed his own treatment or advice.

(5) Talking on an informal basis to a family member or friend who is a doctor to obtain medical advice.

Note: Exclude visits for shots or examinations (such as chest X-rays) administered on a mass basis. For example, a visit to a clinic, mobile unit, or some similar place to receive an immunization, a single chest X-ray, or a certain diagnostic procedure which was being administered identically to all persons who were at the place for this purpose,

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would not be counted as a visit. However, physicals for athletes, or the Armed Services are not mass visits and should be included.

Also, exclude as "visits" calls a doctor made while the person was an inpatient in the hospital.

DOCTOR'S OFFICE--(D5-5) The office of a doctor in private practice. This may be an office in the doctor's home, an individual office in an office building or a suite of offices occupied by several doctors. This category also includes "doctors clinic."

ELIGIBLE RESPONDENT--(D3-1) A competent related adult household member 19 years old or over, single persons 17 or 18 years old if there is no related persons in the household who is 19 years old or over; unrelated adults responsible for the care of a child or an incompetent person; Armed Forces members living at home.

EMERGENCY ROOM--(D5-5) A unit of a hospital where persons may receive medical care usually of an urgent nature without or before being admitted as an inpatient.

EYE EXAMINATION (GLASSES)--(D5-9) An examination of the eyes for the purpose of establishing a need for eyeglasses or for a change in the type of eyeglasses being worn. Classify any other eye examination or treatment of an eye condition as "Diagnosis or treatment."

FARM (PLACE OF ACCIDENT)--(D4-36) A farm building or land under cultivation, but not in the farm home or premises. Farm includes a ranch, as used here.

FEDERAL GOVERNMENT--(See Government, Federal.)

FIRST NOTICED--(D4-26) When a condition first began to give any

trouble or show any symptoms. This could have been prior to the time the condition was diagnosed, if there were symptoms which later proved to be the diagnosed condition.

For the after effects of an old injury (one which happened more than three months ago), when the present ill-effects were first noticed. For a condition that has continued for a long time, such as emphysema, or stomach ulcer, it is the date the trouble was first noticed, not the date of the most recent attack or flare-up.

For conditions which usually last a short time, such as colds, but occur frequently, it is the date of the most recent attack.

FULL TIME JOB--(D11-8) One at which the person worked 35 or more hours per week.

GENERAL CHECKUP--(D5-8) A visit to a doctor for the purpose of determining the general state of the person's health. This category includes checkups for specific purposes, such as physical examinations required to obtain employment, for college entrance, to obtain insurances, etc.; periodic (yearly) general checkups; visits to the well-baby clinic etc.

However, a visit to a doctor for a checkup or examination for a specific condition such as when a person goes at regular intervals for a checkup for TB or a heart condition, should not be classified as "General checkup" but as "Diagnosis or treatment."

GOING TO SCHOOL--(D3-42) Attendance at public or private schools, whether the course is vocational or academic. Include special schools, e.g., for retarded children or corrective schools for delinquents. Include attendance at a university

or other institution for adult training or education.

GOVERNMENT, FEDERAL--(D11-24) Any branch of the Federal Government, including government-owned bus lines, government-owned electric power utilities, civilian employees of the Armed Forces and persons elected to paid Federal offices.

Exclude paid employees of the American Red Cross, the U.S. Chamber of Commerce and similar civic and national organizations (Pvt. pd.).

LOCAL--(D11-24) Employees of cities, towns, counties, and other local areas, including city owned bus lines, electric power companies, water and sewer services, and employees of public elementary and secondary schools. Since State Boards of Education often control subject content of schools, some school employees think that they are State employees but in almost all cases they are local government employees.

STATE--(D11-24) Employees of State government, including paid State officials, State police, and employees of State universities and colleges.

HEAD OF HOUSEHOLD--(D3-4) The person regarded as the head by the members of the household. It may be the chief bread winner of the family, the parent of the chief earner, the only adult member of the household, or a member of the Armed Forces living at home about whom we want no health information. In husband-wife

households list the husband first, even if the wife is considered the head.

HIGHWAY (LAND)--(D4-38) Any street, road, path, etc., (either public or private) which is customarily used for vehicular traffic.

HOME (DOCTOR VISIT)--(D5-5) Any place where the person was staying at the time of the doctor visit, including own home, friend's home, hotel room.

HOME (PLACE OF ACCIDENT)--(D4-36) Includes a person's own home and also any other home, vacant or occupied, in which he might have been when he was injured, as well as homes being remodeled or undergoing repair. Consider an accident occurring at a house under construction as "Industrial place".

At home (adjacent premises) - The accident occurred in the yard, the driveway, patios, gardens, or walks to the house or a garage. On a farm, the adjacent premises include the home premises or garage, but not the barns or other buildings (unless used as a garage) or the land under cultivation.

At home (inside house) - The accident occurred while the person was inside the house, in any room or porch but not an inside garage. Porches, or steps leading directly to porches or entrances are considered as "inside the house." Falling out of a window or falling

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off a roof or porch also are included as "inside the house."

Also include in this category injuries happening within motel or hotel rooms. The lobby corridors, and other public places within the motel or hotel premises are not regarded as "home." Mark them as "other" and specify.

HOSPITAL (BEING IN)--(See "Being in a Hospital.") EMERGENCY ROOM--(See Emergency Room.) OUTPATIENT CLINIC--(See Outpatient Clinic.)

HOUSEHOLD--(D3-4) The entire group of persons who live in one housing unit or one other unit. It may be several persons living together or one person living alone. It includes the household head and any relatives living in the unit. The household may also include roomers, servants, or other persons not related to the head.

IMPAIRMENT--(D4-19) Deafness, trouble hearing or any other ear condition, blindness, trouble seeing, or any other eye condition, missing hand, arm, foot or leg--all or part of; trouble, stiffness, or any deformity of foot, leg, fingers, arm, or back.

IMMUNIZATION OR VACCINATION--(D5-9) Shots or injections to prevent particular diseases.

INCOME--(D11-31) Wages and salaries, tips, commissions, net income from business or farm, pensions, allotments, dividends, interest, rent, welfare, cash bonuses, alimony, and other money income.

INDUSTRIAL PLACE (PLACE OF ACCIDENT)
(D4-37) A factory, auto repair garage, railway yard, a warehouse, a workshop, a loading platform of a factory or store, etc. Include construction projects (houses, buildings, bridges, new roads) as well as buildings undergoing remodeling.

Classify private homes undergoing remodeling as "Home".

INJURY--(D3-31) Cuts, bruises, burns, sprains, fractures, "insect stings," "animal bites," "sunburn," "sun poisoning," "heat or sun strokes," "blister," "frostbite," "frozen feet," and poisoning. (See Poisoning.)

INPATIENT--(D5-5) One who remains overnight or longer in a hospital as a patient.

INTERVIEW, COMPLETED--(D2-14) All questions were asked on personal characteristics and health for all members of a household. If a respondent has refused to answer a few of the questions, such as income, but has provided the rest of the information to the best of his knowledge, the interview is considered completed.

PARTIALLY COMPLETED--(D2-12) An interview has not been obtained for some members of a household. Enter the person number and the reason for noninterview in the footnote space on the front of the questionnaire.

INTERVIEW WEEK--The week in which the interview is completed, beginning with Monday and ending with Sunday night.

JOB--(D11-6) A definite arrangement to work for pay full-time or part-time.

On Call--(D11-6) Do not consider a person "on call" to work only when his services are needed as having a job during weeks when he does not work. For example, a substitute teacher who did not work last week or the week before.

Seasonal--(D11-6) Consider seasonal employment as a job only during the season and not during the off season.

KEEPING HOUSE--(D3-41) Housework around the person's own home but not paid housework for someone else.

LAYOFF--(D11-7) Waiting to be called back to a job from which a person has been temporarily laid off or furloughed. Layoffs can be due to slack work, plant retooling or remodeling, seasonal factors, and the like. If a person was not working because of a labor dispute at his own place of employment, he is not considered "on layoff" but with a job from which he is absent.

LIMITATION OF ACTIVITIES--(D3-44) A person is limited if he considers himself to be limited in the kind or amount of work, housework, play or other activities he can do.

LOOKING FOR WORK--(D11-7) Any effort to get a job or to establish a business or profession. A person was looking for work if he actually tried to find work during the past two weeks and also if he made such efforts within the past 60 days, and was waiting during the past two weeks to hear the results of these earlier efforts.

MAIN (MAJOR) ACTIVITY--(D3-42) That activity which the person considers his major activity during the past 12 months.

MANUFACTURER--(D11-10) Producer of goods for sale.

MANUFACTURER'S SALES OFFICE--(D11-10) A separate sales office of a manufacturer away from the factory.

MOTOR VEHICLE--(D4-38) A power operated vehicle, not on rails, for transporting persons or property, intended for use on a land highway, either public or private; or a self-propelled non-highway vehicle, such as construction equipment, tractor, farm machinery, or tank when operating on a highway. Attached objects, such as a sled, coaster, or

trailer are considered as part of the motor vehicle.

MOVING--(D4-38) Consider the motor vehicle as moving if the wheels were moving (this includes skidding) or if the vehicle had come to a stop just an instant before the accident occurred.

NEVER MARRIED--(D3-21) Includes persons whose only marriage was annulled.

NEVER WORKED--(D11-25) Never had a full-time civilian job lasting 2 weeks or longer.

NONINTERVIEW--(D14-1) A sample unit which is not interviewed.

Type A Noninterview--(D14-1)
Refers to sample unit occupied by persons eligible for interview but for which no interview was obtained, such as Temporarily Absent or Refusal.

Refusal--A respondent refused to be interviewed. In a footnote explain the pertinent details regarding the respondent's reason for refusing.

No One at Home--After making repeated calls, you have not found an eligible respondent at home during the interview week even though there are people living there.

Temporarily Absent--The sample unit is the usual residence of a household which is temporarily away and will not return until after the particular interview period.

Other, Type A Noninterview--(D14-3) Occupied units on impassable roads, quarantined households and any other Type A cases not listed.

NONMEDICAL DOCTORS--(D3-35) Includes opticians, Christian Science Healers,

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optometrists, naturopaths and other persons giving advice or treatment but who are not medical doctors.

NONPAID--(D11-25) Work without pay on a farm or in a business owned by a related household member. Room and board and a cash allowance are not counted as pay for these family workers.

If the person receives money for such work, this person should be classified as "P".

NURSING HOME--(D3-52) Any type of home, sanitarium or other place which provides medical or personal care for reasons of mental or physical health or advanced age.

ON CALL--(See "Job.")

ONSET--(See "First Noticed.")

OPERATION--(D6-11) Any cutting of the skin, including stitching of cuts or wounds. Include cutting or piercing of other tissue, scraping of internal parts of the body, for example, curettage of the uterus, and setting of fractures and dislocations (Traction). Also include the insertion of instruments in body openings for internal examination and treatment, such as bronchoscopy, proctoscopy, cystoscopy, and the introduction of tubes for drainage. Include anything ending in "--ectomy" for example, appendectomy (removal of appendix), tonsillectomy (removal of tonsils), etc. Injections, transfusions and routine blood tests are not operations; neither is pumping out or washing out of the stomach or bowels. Also do not include a routine circumcision for a newborn baby as an operation.

OUTPATIENT CLINIC--(D5-5) A unit of a hospital where persons may go for medical care without being admitted as an inpatient.

PLACE OF RECREATION AND SPORTS--
(D4-37) A place designed for sports

and recreation, such as a bowling alley, amusement park, baseball field, dance hall, mountain or beach resort, or stadium. Exclude places of recreation or sports located on the premises of an industrial place or school, and places not designed for recreation or sports, such as a hill used for sledding or a river used for boating or swimming.

PLACE "OWN", "RENT", "RENT FREE"
(D2-8) The entire acreage considered to be part of the same "place," including any part rented out to others. Even if the owner rents out all the land but continued to live on it, the rented land is part of the owner's place.

OWN--(D2-7) Owned or being bought by a household member.

RENT--(D2-7) "place" for renters includes only the house and land for which they are paying rent, and not the entire acreage or property of the owner. This is an especially important distinction and one which you should explain to the respondents, if necessary.

RENT FREE--(D2-8) Occupied rent free in exchange for services rendered, such as caretaker, janitor, etc.

POISONING--(D3-31) Include as injury, illnesses resulting from swallowing, drinking, breathing or coming in contact with some poisonous substance or gas. Poisoning may also occur from an overdose of a substance that is nonpoisonous when taken in normal doses. Exclude conditions which are diseases or illnesses, such as "poison oak," "poison ivy," "ptomaine or food poisoning."

PRE OR POSTNATAL CARE--(D5-9)
Consultation concerning the care of the mother, including visits by the mother to the doctor for checkups during the pregnancy and also during the period right after delivery.

Exclude consultations for illnesses not related to pregnancy or delivery.

PRESENT EFFECTS--(D4-35) Present ill effects or results of an accident or injury which occurred more than three months ago.

PRIMARY SAMPLING UNIT (PSU)--(A1-5) A combination of one or more counties and cities, or part of counties. PSU's are selected by scientific sampling methods to represent the entire population of the United States.

PRIVATE-PAID--(D11-24) Working for a private employer for wages, salary or commissions including compensation by tips, piece-rates, or pay in kind, if received from nongovernmental source, regardless of whether the source is a large corporation or a single individual. Include also work for wages or salary for settlement houses, churches, unions, and other nonprofit organizations.

RACE--(D3-16)

White--Includes Latin-Americans unless they are definitely Black, Indian, or other nonwhite.

Black--Black or Negro.

Other--Race other than White or Black, including Japanese, Chinese, American Indian, Korean, Eskimo, and Hindu.

Code the race of the mother for persons of racial mixtures. Code the race of the child if different from the adopting parents.

REFERENCE DATES--(D3-20) The dates referred to in the probe questions.

2 week--The 2 weeks (14 days) ending the Sunday night before the interview.

12 month--The 12 months ending the Sunday night before the inter-

view, and beginning with that Sunday's date a year ago.

Hospital--The period ending the Sunday night before the interview and beginning a year previous to the first of the month preceding the month in which Monday of interview weeks falls.

REGULAR SCHOOL--(D11-1) A "regular" school advances a person toward an elementary or high school diploma or a college, university, or professional school degree. Persons are given formal education in graded public or private schools, whether day or night schools, and whether attendance was full-time or part-time.

RELATED--(D3-1) Related by blood, marriage, or adoption.

RETAIL--(D11-10) Sells primarily to individual consumers or users. Establishments such as laundries, render services to individuals and to organizations. Report as retail but also show the type of services provided, e.g., TV and radio repair.

RETIRED--(D3-42) A person reported as retired even if he is under 45. If reported as unable to work or something else, classify as reported rather than retired.

SALES FROM THIS PLACE--(D2-9) The gross amount received for the sale of crops, vegetables, fruits, nuts, livestock and livestock products (milk, wool, etc.), poultry and eggs, nursery and forest products produced on this "place." This refers to the gross sales made from the "place" during the past 12 months.

SAMPLE--The entire group of living quarters assigned for interviewing in any one quarter of a year; it represents all households in the United States. Each sample is assigned a three-digit number called a sample designation. The first two

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digits of the sample designation identifies the year and the last digit identifies the quarter in which the sample is interviewed; for example, 781 identifies 1978, 1st quarter. Generally a sample household is not interviewed more than once in the HIS survey.

SCHOOL LOSS DAY--(D3-24) When more than half of the scheduled school hours for persons 6-16 years old were lost due to an illness or injury.

SCHOOL, PLACE OF ACCIDENT--(D4-37) Either in the school building or on the premises (campus). Include all types of schools, elementary, high schools, colleges, business schools, etc.

SELF-EMPLOYED--(D11-25) Persons working for profit or fees in OWN business, farm, shop, office, etc. Include persons who have their own tools or equipment and provide services on a contract, subcontract or job basis.

SEPARATED(MARITAL STATUS)--(D3-21) Married persons who have a legal separation or who have parted because they do not get along with each other.

SOMETHING ELSE, 6-16--(D3-43) Usual activity for the past 12 months of persons aged 6-16 years who are not working, keeping house, or going to school.

SOMETHING ELSE, 17+--(D3-42) Usual activity for the past 12 months of persons aged 17 years or older who are not retired, working, keeping house, or going to school. Include persons recently discharged from the Armed Services but not retired.

SPECIALIST--(See Doctor, Kind.)

STREET AND HIGHWAY--(D4-36) The entire width between property lines of which any part is open for use of the public as a matter of right or custom including shoulder or curb. Public sidewalks are part of the street but private driveways, private lanes, private alleys and private sidewalks are not considered part of the street.

TELEPHONE (DOCTOR VISIT)--(D5-5) A telephone call made to or from a doctor or doctor's office which relates to treatment or advice given by a doctor directly or transmitted through a nurse.

THINGS HE USUALLY DOES--(See Usual Activities.)

USUAL ACTIVITIES--(D3-26) For school children and most adults, this would be going to school, working, keeping house, etc. For children under school age, usual activities depend upon whatever the usual pattern is for the child.

USUAL PLACE OF RESIDENCE--(D3-8) The place where a person usually sleeps. A usual place of residence must be specific living quarters held for the person to which he is free to return at any time. A mail address alone does not constitute a usual place of residence.

Living quarters which a person rents to or lends to someone else cannot be considered his usual place of residence during the time they are occupied by someone else. Likewise, vacant living quarters (sometimes furnished) which a person offers for

rent or sale during his absence should not be considered his usual place of residence while he is away.

Persons with no usual place of residence elsewhere include migrants, persons trying to find permanent living quarters and other persons who are staying temporarily in the unit and do not have a home of their own.

VETERAN--(D11-3) A person who has served on full-time active duty in the U.S. Armed Forces.

Vietnam Era--August 1964 to April, 1975.

Korean War--June 1950 to January 1955.

World War II--September 1940 to July 1947.

World War I--April 1917 to November 1918.

Post Vietnam (May 1975 to present)

Other Service--A period of service, none of which was during World War I or II, the Korean War or the Vietnam Era.

VOLUNTEERED CONDITION--(D3-19)
A condition reported while asking questions on the Probe pages not designed to pick up conditions. Enter in item C2 any volunteered

condition which meets the definition in paragraph a) on page D3-19.

WHOLESALE--(D11-10) Buys products in large quantities for resale to retailers, industrial users, or other wholesalers.

WORK--(D11-6) Paid work as an employee for someone else for wages, salary commission or pay "in kind" (meals, living quarters, or supplies provided in place of cash wages). Also include work in the person's own business, professional practice, or farm and work without pay in a business or farm run by a related household member.

Exclude work around the house, volunteer unpaid work such as for church, Red Cross, or charity, and service in the Armed Forces.

ACCIDENT AT--(D4-37) The person was on duty at the time of the accident. A salesman traveling from town to town would be "at work" if an injury occurred en route between towns, but a person on his way to an office job who had an accident en route would not be considered as having been injured "at work."

WORK LOSS DAY--(D3-24) When more than half of the day was lost due to an illness or injury.